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ORIGINAL COMMUNICATIONS.

*TROPHOPATHY IN THE FATTY AND FIBROID DEGENERATIONS.**

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AND

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INTRODUCTION.

THE animus of this contribution is the belief of the writers' that *trophopathy* (*trophos*, food; *pathos*, disease) has more to do with the cause of the so-called incurable diseases than the profession gives credit to, and, to show that our belief is founded on facts, we will immediately proceed to the consideration of the subject in the concrete, to wit, the reading of some histories of patients that have been under our care.

CASE HISTORIES.

Case I. A little more than four years ago, a gentleman brought to our office a friend, who appeared to the senior writer to be almost moribund; indeed, he feared the man would die in the office. Examination showed the case to be suffering from an enlarged heart, a fibroid liver, and Bright's disease of the kidneys; the urine contained albumen, casts, and fatty epithelia. We will here make note that, in our study of patients for the evidence of Bright's disease, little care is paid whether the casts are fatty, hyaline, waxy, etc. Amyloid bodies are usually found in the urine when the kidney is first breaking down.

But we consider no case to be full fledged Bright's disease till albumen, casts, and fatty epithelia are found. There may be any one of these three, or any two; it is a common matter to find such cases which are just hovering along the margin of health and disease, and yet not full-fledged, so to speak. This patient, desperate as his case was, went under the treatment to be described further on, and recovered and would be here to-day for your examination if possible; his heart, liver, and kidneys are now doing healthy work.

Caes II. About one year before his death, America's greatest laryngologist, Dr. Louis Elsberg, came under the care of the senior writer. His case was one of Bright's disease, with all the signs as before enumerated. He was placed on rigid diet, and would take no medicine. This regimen he followed out for months, and all of the morphological and chemical evidences of his disease disappeared from the urine. He was then allowed some leeway in his diet. The senior writer called one morning at his office and found Dr. Elsberg at breakfast, eating freely of all the starch and sugars that were placed before him. It was said to him, "Elsberg, if you persist in this reckless diet you will kill yourself." The medical world knows how he died suddenly of pneumonia, perhaps Bright's disease of the lungs.

Case III. About four years ago, a million-

* Read before the Section of Practice of Medicine, Materia Medica and Physiology of the American Medical Association, at its fortieth annual meeting, 1889, by the junior writer.

aire was treated for two months for Bright's disease of the kidneys and lungs. At the expiration of that time, feeling *too poor* to continue under a physician's care, he undertook the direction of his case,—ate wrongly, overworked, and while superintending some repairs in his house was poisoned with sewer-gas. The doctor was sent for again, but the good work that had been done for him in the two months' treatment was thoroughly undone, and he died.

Case IV. June, 1880, the senior writer called to see primipara in a non-professional way. She was within three weeks of her expected confinement, and, to his horror, he found her bloated, and on examination the urine proved to be heavily albuminous, and contained casts and fatty epithelia. She was placed on rigid diet, but labor came on in thirty-six hours, and she was easily delivered of her child, which weighed but three and a half (3½) pounds. The placenta was covered with numerous elevations which, under the microscope, proved to be made up of plates of cholesterine. Two days after confinement, a steam fire-engine came to the corner near the house in which she lived, and fastening to a hydrant commenced to pump. The noise worried her; entreaties to the engineer to desist were of no avail, and the poor woman went into convulsions. The senior writer arrived soon afterward. She was kept under the influence of ether and was purged, but the convulsions did not cease till thirty-six hours had elapsed. She was placed on a diet of beef-essence; no medicines. Later on, broiled steaks were given her. The face was drawn to the right and her brain was very weak. The regimen was persisted in till the pathological evidences were removed from the urine, and afterward her diet was two-thirds animal and one-third vegetable food. She has borne two more children, both of whom are much more rugged than the first.

Case V. Mrs. Blank went on treatment about four years ago, and on thorough examination was found to be sick with fibrous consumption, Bright's disease, and a small fibroid tumor of the womb about the size of a man's fist. The evidences of Bright's disease disappeared; the fibroid tumor has gone, and we can say that she is cured of her fibrous consumption, if there is such a thing as a cure of a chronic disease. She is now passing through the change of life and can by no means be called a thoroughly well woman, yet, if she is here to-day, I think you will find, on talking with her, that she considers the diseased conditions above described as not troubling her now.

Case VI. Three years ago, a young married woman came to our office and was found to be sick with Bright's disease of the kidneys; indeed, it is a rare thing to find urine that contained as many casts of all kinds as hers did. She was placed on treatment and in one month's time the pathological evidences had nearly all disappeared. She persevered and is to-day enjoying good health.

Case VII. The Rev. ——, treasurer of a great missionary society, came under our care at about the same time as Case VI. He also had Bright's disease. He went on treatment, though keeping at his work. His loss of flesh and strength, at first, greatly disturbed his wife, and it was hard work to make her believe that he should be held to the plans. After three months he took a vacation in Maine, still pursuing the plans of diet and medication, and in the fall came back to work. This case may be called *in progress*. His occupation is very laborious, tiring to the mind and full of worry. At the present he is under the plan of two-thirds animal and one-third vegetable food, eating one kind of meat and one vegetable at a meal. June 18, 1889, his specimen presented no casts, no fatty epithelia, and but a trace of albumen. Yet he tells us that he has never in his life worked so hard as the last month, and wonders that he holds on as well as he does at the age of seventy.

Case VIII. 1877, the senior writer saw in consultation a lady who was said to be dying of Bright's disease, and that the attending physicians wished blood to be transfused into her veins. She was as white as the sheets she lay between, was vomiting, and her urine confirmed the diagnosis made by the attendants. Before going back to Boston to get instruments to transfuse with, the senior writer sat down beside her and, taking a diet list from his pocket, asked her if she could eat the different foods as named thereon. She said no till tripe was mentioned, and replied that she could eat that. So ordered. On returning with instruments the next day he was told that there was no need of operating, as the patient had retained the tripe and was better. In March,

1886, we were in this neighborhood operating on a case of uterine fibroid. The father expressed a desire to the son to see if this patient was alive, and on calling on her attending physician learned that she was, and, on visiting her, found a large, florid woman, who said "that she was not much for work, but was far from being dead." It seems that she lived on tripe, milk warm from the cow, and other animal foods for over two years. By this time the evidences of Bright's disease had gradually and wholly disappeared from the urine.

Case IX. Some years ago, Miss A. B., aged 24, was put on strict diet for her fibroid, which was of some years' standing, monolobed, interstitial, hard, invested the whole uterus, and extended beyond the navel. She ate beef mostly, with clear tea and coffee, and took a simple tonic. It was much against her appetite, but, as she was a woman of few words and of a determined will, and had confidence in her medical adviser, she persevered until the uterine fibroid had all disappeared, and she remains to-day in perfect health. At present, in handling these cases of uterine fibroids, both diet and galvanism are employed, the latter according to the rules laid down by the senior writer in 1871. No one can say that this case was cured by the menopause, as so many medical agnostics as to the curability of uterine fibroids by either galvanism or food, or both, claim. The history of the last eighteen years has proved conclusively that uterine fibroids are no longer *opprobria medicorum.*

Case X. 1882, Mr. H. L. H., a small, not robust, man over sixty years of age, for many years had difficult digestion, caused by overfeeding of vegetable food, so that the stomach was distended, walls infiltrated and hardened, causing a fibroid condition of the organ. When seen by the senior writer, he had been under treatment by Dr. Salisbury with hot water, chopped beef diet, stomachic medicines, etc. He ran down rapidly under the treatment, vomiting often and severely; throat sore and deglutition difficult; emaciation; weakness; some fever at times. He had fainting fits and appeared so moribund that his wife thought he would die in her arms. His hands, feet, and legs were cold; circulation feeble; stomach distress great; mind clear and tractable. There was also complete dullness on percussion over the hepatic region; the abdomen empty; walls drawn toward spine, flat, hard, not tender. He took no food by the mouth, but milk by the rectum. Was given nitric acid sponge-baths, one teaspoonful to one pint of water, night and morning. Biniodide of mercury, one-sixteenth grain, was given twice a day; one grain of the sulphate of quinine was sprinkled once in two hours on the tongue, which was white and coated. Compress of linen cloth wet in the nitric acid bath was placed over the hepatic region and kept there till the skin was red. Though the vomiting continued for a little time the effect of the rectal aliment told. The administration of mercury was followed by a diminution of the liver dullness. Soon he was able to take of the beef-essence by the mouth; though he had no appetite, still he kept taking it, and by degrees increased the amount till the essence of six pounds of beef daily was used by oral and rectal alimentation. Moving very carefully, the rectal administration was given up and the beef-essence continued by the mouth. The case slowly improved, the urine showing less and less reaction of bile, the dullness of the liver running abreast, with the exception of a few days—that is, the dullness diminished with the diminution of bile in the urine. In the course of six weeks the appetite returned, former treatment was resumed, and he remains cured, 1889.

Cases XI, XII, and XIII were all sick of Bright's disease in 1878, 1880, and 1884. Cases XI and XII, each about sixty years of age; case XIII, twenty-four years old, all practically treated on same plans and all here to-day for your inspection as cases of cures of a so-called incurable disease.

Case XIV. 1876, a middle-aged mother of a large family lay sick in bed of great grief at the loss of her last surviving daughter who had died from the effects of the perforation of the vermiform appendix by an orange-seed. There were present cardiac hypertrophy and insufficiency of the left auriculo-ventricular valve, severe attacks of angina pectoris, when it seemed that death was near. The objective lesions other than those named were retroversion, engorgement, hardening, eversion of the os uteri, and behind the uterus four small, hard, marble-like tumors; very severe pain, sharp and stinging in the pelvis mostly; profuse vaginal discharge, not bloody; menorrhagia. Added to this there was loss of appetite so complete that everything in the

nature of food was loathed, even milk being repulsive; loss of flesh and strength, being unable to rise erect for ninety days; inability to lie on either side for most of the time; nausea; legs cold and sweaty up to the knees: oft-times great stomach distress, with wind colic; urine high-colored and of a rank smell, as if putrid; bowels constipated; a terrible feeling of nervous restlessness, causing her to move her feet rapidly up and down in the bed; visitors coming and assuring her by their looks and actions that she was about to die. Added to this there was cancer in her family: her father having died of cancer of the stomach, and her maternal grandmother of cancer of the breast.

She was put on general and local treatment, and it was faithfully carried out in connection with good nursing; but she gradually grew worse until, at the expiration of three months, the symptoms were so alarming that the senior writer was obliged to take strong and decisive grounds, and to tell her—"You must eat, or die of cancer of the womb. Make up your mind to one or the other." She decided to live and to eat: eating against her appetite, but with her intellect and reason and the advice of her medical attendant. She began with tenderloin steak, broiled and cut fine. The most she could take at first was a quantity represented by two teaspoonfuls; these she swallowed by a desperate effort, her stomach rising against it. She was fed every four hours. Even after she had fed thus for weeks she felt she *would rather die almost than eat*, but battled against appetite by sheer force of will. The only way she could get down the beef was by swallowing one mouthful of lager beer, which was the only article which did not go against her stomach. The quantity of meat was increased gradually and she was fed two months against the appetite. The nausea, however, left in about three or four weeks, and at this time she was able to move some, and was placed in a Cutter invalid chair part of the day. After two months of feeding she was taken carefully to the sea-shore, and there she began to get an appetite, but it took one year before she could walk five hundred feet. This case did not fear death, but the form. The results obtained by food are in her case:—

1. Heart normal in size.
2. Valvular insufficiency hardly perceivable.
3. Angina pectoris gone.
4. Uterine disease relieved; tumors disappeared, uterus mobile, discharges normal.
5. Urine clear as champagne, 1015–1020 specific gravity; no odor; no deposit on cooling.
6. Restoration to active duties as housekeeper and mother of the family.

No medicine was given after the food treatment save Hoffman's anodyne when she had palpitation of the heart and suffocation.

When we state that this case is here to-day we think our hearers will admit that we have a living argument that we cannot ignore as to curability of chronically diseased tissues. As the time is short, we will give no more histories and proceed to the closing section of this contribution, to wit.:—

STATEMENT OF PRINCIPLES OF THERAPEUTICS.

1. All cases of serious chronic disease which come under our care are usually placed on a rigid diet of beef, from the top of the round, which is freed, either by hand or by the use of the American or Enterprise Chopper, from all fat and connective tissue. The resultant is the pure, lean, muscular fibre, which is moulded by the use of a knife and fork and broiled, served to the patient on a hot-water plate, and seasoned with pepper, butter, and salt. In some cases, especially of fatty degeneration, butter not allowed. Too much care cannot be given in the selection of the beef and in its preparation; the hand should touch the meat as little as possible, as the human animal heat changes the character of the muscle-pulp; it is an art to prepare and broil the meat rightly; some mold the cakes too firmly, and the resultant is not good for the patient. No physician or nurse should consider it an easy thing to prepare the beef properly. It is hard work to make patients live on rigid diet; hence, all the help that the art and chemistry of cooking can give should be utilized.

When the beef has been manipulated and broiled satisfactorily the result will be a cake of pure muscle; its outside thoroughly done and of dark color; on opening it the color is reddish *but not raw.*

Season with salt, pepper, butter, lemon juice, Worcestershire sauce as desired. Exclude butter in all cases of fatty degeneration.

2. In these days of hard work and too fast living the busy man can do well if he eats but one meat and one vegetable at a meal. If he

has plenty of time to use in lying around, that is another matter; then let him live to eat, and vegetate while doing so.

3. Attention must be paid to that great gland, the skin, by giving the whole body a daily sponge-bath of ammonia and water, and once a week a soap-and-water bath.

4. Passive exercise by rubbing and massage must be daily taken. A great amount of force can be placed in a sick person by the rubbing of him or her by a strong, composed, healthy man or woman. The well person may place one hand on the forehead and the other on the ankle or thigh of the sick one. Once in a while we find a case that will not be rubbed, *i.e.*, the rubbing instead of conferring force to the patient and soothing him will irritate and annoy him. When the patient is improving the riding of a barebacked horse at a walk will confer force on him. Still later on active exercise must be taken, as walking.

Riding in an easy carriage must also be used as a means of passive exercise.

5. The patient's underclothing must be changed night and morning, and care must be taken by the physician to see that the patient is clad warmly enough. Some people do not know what is the proper amount of clothes to wear.

6. The *morale* of the patient must be attended to. We are often asked, "How do you make your patients eat beef? I cannot make mine." The reply is simply, "We make them." Those that come to us are usually sick enough to care to do most anything to get well. Indeed, they have been discouraged by the advice of friends and others that they could not be cured. Giving such a one the history of those that have been cured, even if as sick or sicker than the one about to commence treatment, and telling him that he is sick with a disease that has been commonly called incurable, that he is curable, and that if he will join hands with us and work together for the desired end, then, if the case consents, good can be accomplished. It is never right to say that you are going to cure a patient. Instead, let him know of his desperate condition and what his chances are. A case of chronic disease should go on treatment for from six months to two years. He should pay by the month and in advance. This insures better work on the part of the patient.

His blood and urine, also fæces, must be studied to see how the case improves, and how much lee-way can be allowed in his dietary. He must be encouraged when in the Slough of Despond, and must be held back when getting better and feeling improved; wants to rush into work again. The mind must be closely studied. Causes of worry removed as far as possible. The patient must be instructed that it is for his benefit for him to give up care and live with the minimum expenditure of nerve-force.

7. *Medicines as commonly called.* There can be no question that in the treatment of these chronic cases the food is the first and the best medicine. If not so considered then take down your text-books and read the matter found under the heading of therapy, and see what a hopeless enumeration of drugs there is. All that we can do is to get the nutrition on to a proper basis and turning the balance to the right side, *i.e.*, toward health, wait and see what dame Nature will do. The waiting is the hardest part of the trouble; so is waiting in all human affairs. But we must not forget that the trouble has been caused by long-continued acts of physiological sin, and it will take a long time of repentance and holy living to make the body whole again.

But if the cases here given have been accurately recorded and truthfully published, then it must be a fact that, as the human tissues are all the time changing, if we give Nature a chance she will lay down the healthy in place of the morbid. How far this principle extends only time will tell. The paper of the senior writer in the Albany Medical Annals, July and August, 1887, on "Diet in Cancer," contains some very valuable facts as to the action of food influences in causing and curing tissues under mob law, rioting, as it were.

Salisbury, in "The Relation of Alimentation of Disease," notes many experiments in the causation of chronic diseases by feeding different foods exclusively. We have often called on the profession to see that these experiments be repeated. If his observations are true, then they are of incalculable benefit to the profession; if not, their status should be known. It is to be hoped that these experiments on men and animals may be repeated on a large scale *that we may know the truth.*

But as to medicines. Tonics are admissible. Pepsin used as indicated. Medicines to keep all of the glands in condition are in order.

As to milk. A great many physicians are using the exclusive milk diet, and with success in many cases. The condition of the urine as to biliousness when using milk must be ascertained. In our work milk often disagrees with our patients. If given it should be taken warm from the cow, or should be sterilized. Milk is very capable of absorbing germs of many kinds, especially those that are producers of fermentative changes.

Lastly, the use of hot water, one hour before meals and on going to bed, is warmly recommended. It is a medicine *par excellence* for the stomach, liver, kidneys, and bowels. The water should be boiled (and spring water or distilled water is preferable); then cool down to a comfortable temperature. The position taken by the senior writer in 1883 in his small pamphlet, "The Therapeutical Drinking of Hot Water," is still maintained by him and corroborated by the junior writer. Hot water has undoubtedly proved to be the "Water of Life" to many a sick one.

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Short-sighted gentleman chooses a pair of spectacles:—

"These glasses," he says, "are not strong enough for me."

"But, sir, they are No. 2."

"What have you next to No. 2."

"No. 1."

"And after that?"

"After No. 1, sir, you will want a dog."—*La Voltaire.*

THE CASE OF BROWN-SEQUARD.

By JOHN V. SHOEMAKER, A.M., M.D.

It might, perhaps, be deemed presumptuous of me to pretend to decide the case of Dr. Brown-Séquard, in face of the manifold adverse final judgments of the secular press, but it is at least permissible to me, as to any other person, to state the case in a light of fairness which has not heretofore been always attempted,—to review, in a word, the facts and their bearings in the case, to see if these warrant the general condemnation with which the man and his theory have been visited.

As a preliminary, it will be well to point out that the arraignment has been entirely too general, that a charge accompanied by specifications is necessary to fair trial, and that this procedure has not been observed in the course of the animadversions against Dr. Brown-Séquard. Upon what counts is he to be tried? Is he charged with being criminal, imbecile, or ridiculous? If he is imbecile or ridiculous he cannot be criminal, and if he is criminal he cannot be imbecile or ridiculous. But it is proper to do first what has not been done, to determine whether it is the man or the theory, or both, that are on trial. If, as the rational order would dictate, the theory is to be placed on trial first,—before the man can be applauded or condemned,—then it will soon be apparent that the theory has not had the faintest semblance of a trial. But certainly both theory and man cannot properly be on trial at the same time, and it is lamentable to be obliged to confess that, before the theory has been adequately tested, Dr. Brown-Séquard himself has been put on trial and condemned.

Another necessary preliminary, it should seem, to acting in the interest of justice would be that intending judges of the case should know what his theory really is, or else they are seeking to try a suppositious case, not the case of Dr. Brown-Séquard.

Scarcely had the announcement of his alleged discovery taken place, when many of the secular papers of the country without hesitation ascribed to him the statement that he had discovered the elixir of life, and many of them still continue to harp upon the false string. Hundreds of articles in the secular press have appeared with this misleading allegation, and, shame to the medical profession, there were

not wanting articles even in medical journals which proved conclusively that the writers had never read the statement of Dr. Brown-Séquard himself. False allegations with regard to his claim having been made were then adhered to, and writers, manifesting sublime ignorance of the facts, and influenced by reports of unfavorable results from the administration of his suggested hypodermic injections, then set to work to vilify him, and the pleasant names of charlatan, quack, empiric, or, as alternatives, imbecile, dotard, jackass, were more freely bestowed upon him than were any of the honors which he has received throughout a long career, and yet we pride and vaunt ourselves upon belonging to the Anglo-Saxon race, which claims above all others to be lovers of fair play.

The usage of allowing some weight to the previous good reputation of the accused has been entirely forgotten in this case, yet if any man should have had good standing before the court of American public opinion, Dr. Brown-Séquard stands on the same footing as that man. By birth American on one side and French on the other, he twice married in America, and has from first to last in his career, although for the most part passed in Paris, shown the liveliest interest in, and affection for, this country. His reputation as a physiologist, the growth of life-long study, is among the first in that branch of science in the world. His standing in an American or any other court of public opinion ought, therefore, to be good. Any charge that could be substantiated against him could probably be based upon nothing more unworthy than what has emanated from the life which he has led as a devotee of science and a recluse for the sake of benefit to his kind.

If it be true that much learning has made him mad, or that imbecility has overtaken him, let us examine for the existence of these facts in what he himself has lately said, for there is no truer test of the sanity of a man than what he says. If he be not actually imbecile, but only degenerated into a silly old man, calculated to make himself ridiculous at any and every turn, then he, being half a Frenchman, will readily agree to be put on trial on the basis of the French aphorism that "to be ridiculous is worse than to be criminal." But, before we put him on trial at all on any count, it is indispensable first that it should be shown what he really does claim, and then whether or not his claim can be sustained.

Let us, then, to begin with, see what he actually does claim. As to the notes which he sent to the London Lancet as a *résumé* of the remarks which he had originally made before the Société de Biologie of Paris, there are, probably, no words, not even including those of the original remarks, which could convey so precisely as these his exact meaning.

He tells us, at the beginning of his discourse on his theory, that he had had a general conception of the subject as early as 1869. This, it will be observed, was long before the period when he could possibly have been charged with imbecility, or even with verging upon that condition. He tells us that, prompted by his thought-tendency, he had, in 1875, made some biological experiments pointing in the direction indicated. He remarks that the degree of success he achieved in these was small, but was still sufficiently encouraging, as indicating a latent principle of life, to warrant him in pursuing his investigations through what seemed an easier path to success. Accordingly, aided by the generalizations which he as a biologist was able to make from an immense number of facts, he began to pursue this path wherever it might lead. At the basis of all his thought thenceforward lay the probability, accepted by his mind, that in the elements of the living vertebrate body, represented by the seminal and ovarian fluids, lay great potency for the individual life, and, if so, he argued, they might, if transformed into another similar living organism, temporarily revitalize it.

If even one of the laity, let alone a medical man, will for a moment reflect how intimately associated are the general health of the organism and the vigorous condition of the generative organs, he will perceive at a glance that the idea of Dr. Brown-Séquard is not far-fetched. Every monthly nurse looks at once at the scrotum of the newborn male child to ascertain the degree of vigor that the organism possesses. The genitalia of the moribund shrink and shrivel as the supreme moment approaches, and, when it is reached, suffer almost instantaneous total collapse.

Let a medical man reflect for a moment that if these are matters of common observation, they must have been among the least of the manifold sources of induction from which Dr. Brown-Séquard conceived the theory that

the seminal and ovarian fluids must possess great vitalizing potency. He contemplates the sluggish condition of the eunuch, and the condition of continent men not eunuchs; the condition of men in youth, their changed condition with the advance of age, and he finds, lying side by side with all functional decline, that the most marked to the individual, although least manifest to the world, is that of the sexual attributes.

Under the circumstances, it is not utterly astonishing that he should have been led to think that, as among all evidences of senility in men and women, the loss or diminution in the generation of the fluids which respectively belong to the two sexes is the weightiest as to the physical degeneration of the organism, the diminution of the fluids might be regarded as one of the *causes* of the degeneration of the organism.

This, however, as we regard it, is the weak point in his conception,—the idea that, at all periods of life, whether in youth or age, the organism is renovated by resorption of these fluids. This makes an effect in him a cause within the organism itself, which, if active, would make of the alternating cause and effect a condition analogous to perpetual motion. This violates a principle of nature. We can readily conceive the proposition that fluids taken from one organism and transfused into another may possibly have a renovating effect on the recipient organism, but not that an isolated, independent organism can to any degree or for any time go on revitalizing itself. That the waning powers of the system should, as a part of vital decadence, fail to produce in quantity or quality the seminal or ovarian fluids, as originally secreted by the organism, is a matter of common observation. That these fluids should at any time of life, as a consequence of their production in any kind or degree, make a store of force upon which the general organism draws, is not in accordance with the lines of scientific thought. The proposition, however, that their potency, as being physically representative of vital force and its propagation, may be effective in temporary revitalization of organisms other than those from which the fluids were extracted, is perfectly comprehensible, and strictly in consonance with the lines of scientific thought.

But this discussion is only incidental to the main purpose of a review of the treatment to which Dr. Brown-Séquard has been subjected. It will be seen that, whether partially or wholly wrong, he has merely stated a theory of his, and that in so doing he has affirmed nothing dogmatically, but has given his reasons at every step for his conclusions.

There is something to be said for him in addition to all this,—that he does not ask to have his views received upon his mere statement. On the contrary, he does not even accept them himself without proceeding to the test of experiment upon himself, and through Dr. Variot, a distinguished medical friend of his, upon several persons of advanced age.

And with relation to these tests he speaks with all the qualifications and due reserves becoming a scientific man. By these experiments in some he is confirmed in his conclusions, but he does not rest satisfied there. He, as a scientific man, knows that a few experiments cannot establish the truth of such an hypothesis as his, and so he appeals to the medical world to repeat his experiments with the testicular fluid, to the end that, if what he surmises be found true, the discovery would be for the benefit of humanity. His marked carefulness and modesty of statement, coupled with perfect clearness, cannot but strike any one who has read his original declarations. Let us refer to a portion of his own language in proof or disproof of what is here said. He concludes the remarks sent to the London Lancet as follows:—

"I believe that, after the results of Dr. Variot's trials, it is hardly possible to explain the effects I have observed on myself, otherwise than by admitting that the liquid injected possesses the power of increasing the strength of many parts of the human organism. I need hardly say that those effects cannot have been due to structural changes, and that they resulted only from nutritive modifications, perhaps in a very great measure from purely dynamical influences exerted by some of the principles contained in the injected fluid.

"I have at present no fact to mention which might serve to solve the question whether it would be possible or not to change structurally muscles, nerves, and the nervous centres by making during a good many months frequent injections of the fluid I have used. As I stated at the Paris Biological Society, I have always feared, and I still fear, that the special nutritive actions which bring on certain changes in man and animals, from the primary embry-

onal state till death by old age, are absolutely fatal and irreversible. But in the same way that we see muscles which have from disease undergone considerable structural alterations regain sometimes their normal organization, we may, I believe, see also some structural changes not essentially allied with old age, although accompanying it, disappear to such a degree as to allow tissues to recover the power they possessed at a much less advanced age.

"Whatever may be thought of these speculations, the results I have obtained by experiments on myself, and those which have been observed by Dr. Variot on three old men, show that this important subject should be further investigated experimentally."

Would any of the gentlemen of the press who have so lavishly poured ridicule on Dr. Brown-Séquard during the last few weeks have stated more modestly than he the provisional conclusions which he has reached? What, even, if he proved to be entirely in the wrong? He has submitted himself to the risk of being proved in the wrong. Is only the finding of truth noble? Is not the search, the sacrifice for truth, the noble part of effort, and the finding of truth only the crown of glory? But often even the finding of it does not obtain any but the martyr's crown. We can demand no more of Dr. Brown-Séquard, or of any other man who has the right to speak on subjects deeply studied, than that he shall frankly speak the truth that seems to himself to be in him. It is a great wrong for those to perpetrate who would applaud if truth were found, and they benefited, but have no mercy, even, on the earnest but unfortunate seeker for it.

But how can we be certain that Dr. Brown-Séquard has not found the truth? He does not claim, despite what the papers say, that he has discovered what amounts to the same thing, the elixir of youth or of life. His claims are strictly bounded by the most precise language, and amount in sum to saying:—

"Having conceived, from previous study and observation, that I could utilize to advantage in the human organism a fluid which would temporarily revitalize it, I have tried, or have had tried, and, as I think, successfully, a few experiments tending toward the determination of the question, I do not claim that these few experiments are conclusive as to covering all human idiosyncrasies, but, such as they are, I commit the knowledge of them, with the formula which I have used, to the experimental tests of the medical world, with the hope that they will be confirmed."

How has the medical world at large in this country, not all the medical world here, acted in this regard? Perhaps Dr. Brown-Séquard would have been more discreet if he had incidentally communicated the fact that he has one of the best laboratories in Paris, that all his life he has been accustomed to trying the most delicate experiments, and had said that he must caution his professional brethren who are not possessed of excellent appliances, and are not adepts in manipulation, to be wary in their procedures. He did not do so; he was too modest a man for that, and he took too much for granted. He took it for granted, for instance, that no doctor would walk down to a market-house, and, upon the interested statement of a butcher that his lamb-fry was rather fresher than even when possessed by the original owner of it, proceed without any antiseptic precautions to make a concoction with a little micro-organic water, and then inject a fluid-centimetre of it into a patient desirous of revitalization. An experiment tried without all the conditions imposed is an experiment, but not the experiment prescribed.

A case once occurred where a man was informed that, if he would build a flue alongside of his water-closets in the basement of his house, a fire near the bottom of it would draw off through the flue all the effluvia from the closets. But, as an improvement upon his instructions, he built the fireplace in such fashion that the heat sent the effiuvia through the house. Dr. Brown-Séquard's theory has not been fairly put on trial, and yet, as has been said, he has been vilified to a degree that would have been warranted only if, instead of having honest intentions, he had been guilty of a fraud.

One of the very few fair examinations of the subject which has been made is to be found described in the paper of Dr. Henry P. Loomis, of New York, the conclusions which he has reached being derived from his own careful experiments. A passage from this paper will evidence how carefully he has worked. It reads as follows:—

"I can see no reason to anticipate danger of septicæmia from the use of the fluid prepared under proper antiseptic precautions, provided the material used be absolutely fresh

and free from all trace of disease. My attention was called to the necessity for the closest scrutiny in this last particular by having discovered, in specimens taken from an apparently healthy ram, a solitary tubercle in which were demonstrated tubercle bacilli. In none of the cases have I seen any bad results, and only in a few has there been a moderate amount of pain at the point of injection, lasting from six to eight hours.

"I can explain the singular nervous affection apparent in certain of the cases only on the theory that upon the nerve-centres the mixture exerts some powerful but as yet unexplained influence, which, even if its use be eventually proved beneficial in some cases, must render its employment in others a matter of caution. It is far from safe to say, and proceed upon the belief, that if it does no good it can do no harm.

"I seem to see in almost all the cases of *old men* subjected to the experiment an increase in strength and vitality, which certainly persists for several days. I have noticed nothing in the least resembling the secondary depression which so commonly follows the use of ordinary stimulants.

"When used in cases of actual disease no modifications of pathological conditions or processes have been recognizable.

"I therefore conclude that the injection of this testicular mixture does, as claimed, produce nutritive modifications in the tissues of elderly men, due probably to the stimulation of the nerve-centres.

"As far as my own experiments are concerned, sufficient time has not elapsed to justify an affirmation or denial of the correctness of Dr. Brown-Séquard's second conclusion. There is in the theory sufficient ground for further experimentation."

These views have about them the true scientific ring. Deny nothing unless it offends against some cardinal principle accepted by scientific men. If a man says he has discovered the wherewithal to neutralize the attraction of gravitation, it is not even incumbent upon one to call his attention to the phenomenon of his walking, to the evidence against him in the sun, moon, and stars. It suffices speechlessly to walk away. So of other claims to discovery that might be adduced. But, barring this conflict with universally-accepted general law, a scientific man is bound to try and test, to enable him to hold fast that which is good and to reject that which is false. Only upon the terms of assuming nothing positively until it has been weighed in the balance, can he possibly be sure of reaching any truth. It is evident, therefore, that Dr. Brown-Séquard cannot be placed on trial even for incompetency until what he has claimed shall have been given the consideration which it has not yet received.

The scape-goat did not pass away with the Jewish Dispensation. Men like, as of old, to visit their own sins of omission and commission on the heads of others.

The profound silence with which the announcement of Dr. Brown-Séquard was at first received, and then the hopeful murmurs that arose, and then the eager advance of worshippers to the shrine of youth, presided over by a portion of the medical priesthood, is the best possible evidence of the existence of a latent, unexpressed general wish always to be young. The strength of the reaction of sentiment proves the power of the original credulity. But there are fluctuations in the minds of men that rise and fall, although not so regularly as those of the ocean.

Let us hope, therefore, that upon a more reasonable wave of public sentiment than the second, crediting not that youth can be regained, but that something beneficial may still exist in the theory of Dr. Brown-Séquard, working for revitalization in the human race, let writers on the subject, for the sake of justice if for nothing else, carefully guard against denouncing either the theory or the man as false, until they are a little more certain than they generally are at present of the facts.

REPORT OF A CASE OF HYDROPHOBIA, WITH REMARKS ON THE EFFECTS OF CURARE.

By A. H. HULSHIZER, M.D.,
PHILADELPHIA.

MRS. N., aged forty-eight years, married (no children), was bitten, June 29, 1889, by her pet dog under the following circumstances: On the morning of June 28th the dog appeared restless, sluggish, and dissatisfied; he would approach his mistress, gazing up in her face as though entreating assistance. The following day (June 29th) he was noticed to be eating dirt, carrying mouthfuls from an adjoining vacant lot, and frequently lapping water; crushing with his teeth pieces of brick

dug from the foot-walk, gnawing at the corner of the house, eating paper, etc. Mrs. N. called the attention of her husband to the strange behavior of the dog on his return from work, suggesting that it might be possible that another bone was fastened in his teeth (as had been the case some time previously); whereupon Mr. N. attempted to hold the dog's mouth open while Mrs. N. searched for the bone. In so doing she was bitten on the thumb of the left hand, the tooth penetrating about one quarter of an inch; she giving a jerk, causing a wound about three-quarters of an inch long. The wound bled but slightly and caused but very little pain. Immediately after receiving the bite she went to a neighboring drug-store, and was advised to apply turpentine, and if it became inflamed to use flaxseed-poultice, which advice was followed, and the wound healed kindly. By the advice of friends the dog was shot the same evening.

From the time of the reception of the injury Mrs. N. would occasionally speak to her acquaintances about it with some concern. Several days afterward her husband noticed her reading a book entitled "The Dog and his Diseases," and when asked why she was reading it she replied, "Dan, I believe Sport was mad when he bit me." The patient always enjoyed good health, and during the past five years she had occasion to consult a physician but once, and that was for a slight attack of rheumatism several months previously. I was called to see her during her last illness on August 11th, at 4 P.M., and obtained the following history: On August 8th, forty-three days after receiving the bite, in company with a number of friends, she visited Tolchester Beach, Md., and on their return trip, while attempting to take a drink of water, she experienced a strangling sensation (as she described it), and later in the evening she experienced a burning or smarting pain in the left hand near the site of the wound, which grew worse the next day, extending up the arm, which she attributed to rheumatism, and treated herself with an old prescription which I had given her several months previously. On August 9th and 10th she was unable to take either liquids or solids, having a dread of water; her sleep was disturbed during the night of August 9th and she did not sleep at all on the night of August 10th. The morning of August 11th she was much worse, suffering from mental depression, restlessness, inability to swallow anything, and discomfort about the throat; had a chill at 3 P.M. At the time I saw her the arm was hot and numb, pain extending to the shoulder; suffering with præcordial discomfort; great mental depression; difficulty of deglutition, the attempt causing a spasm of the muscles of the throat and involving the muscles of respiration; susceptible to atmospheric changes; thirsty, and sense of dryness in the throat. Upon attempting to give her a tablespoonful of water she was at once seized with a suffocating cough, convulsive tremors, livid face, with a gasping for breath. Temperature, 99.2°; pulse, 114. I gave her one-third of a grain of sulphate of morphine hypodermically, and directed that she should have one-sixth of a grain every hour until I could see her again, unless sleep was sooner produced. I visited her again at 10 P.M. The symptoms were more marked; saliva abundant and viscid, spasms intense and more readily excited. She had already taken one and one-half grains of sulphate of morphine with no apparent effect upon the disease. I then prescribed a mixture containing chloral hydrate, three drachms, and directed one-sixth to be given per rectum every hour unless sleep was sooner produced; and, as she had not been able to take any nourishment for two days, I directed her to have an enema of whisky and beef-tea every two hours, and apply alternately cold and heat to the base of the brain and upper part of the spine.

I was summoned again at 5 A.M. on August 12th. The patient had not slept any during the night; spasms recurring with greater frequency and severity, so as to become general and convulsive in character; dysphasia still persistent; mental distress greatly increased; reason partially lost during the paroxysm. Spasms were produced by the slightest atmospheric change. Temperature in axilla, 100.4°; pulse, 122. At 5.30 I gave her hypodermically one-third of a grain of curare, and repeated the same dose at six and again at seven o'clock. I called again at 9.30; the spasm somewhat less in severity but no change in frequency; gave one-half of a grain of curare. Although the patient desired water and was constantly asking for drink, it was impossible for her to swallow any; upon making an effort to drink she was at once seized with a spasm. Dr. G. R. Hulshizer saw her with me at 12 M. Her condition was unchanged except slight relaxa-

tion of the muscular system; skin moist; had great difficulty in clearing the mouth and fauces from the thick and viscid saliva. We agreed to increase the frequency of the dose of curare, and Dr. G. R. Hulshizer remained with the patient to administer the curare and watch its action. She was given during the three and one-half hours following two and one-third grains in divided doses, which produced partial loss of the muscular power of the lower limbs and slight ptosis. Her condition, however, was much improved; spasms were now only produced by an effort to swallow liquids, a draught from an open door, or fan being used in the hand of an attendant. The curare was discontinued for the time, and I directed that whisky and beef-tea be given every hour. At half past nine o'clock I found the patient much the same, and attempted to give her by the mouth some champagne, which caused a recurrence of the spasm. Repeated curare, one-third of a grain. I was called to see her again at 12.30 A.M. on the following day. Spasms were again severe, and she was vomiting a greenish-brown liquid, which was apparently caused by the effort to clear the mouth and fauces of saliva; she was greatly exhausted. Notwithstanding the great prostration I again administered one-third of a grain of curare. Three o'clock.—The vomiting at this time was almost incessant. She was given whisky hypodermically every few minutes, hoping thereby to prevent extreme exhaustion,—a condition into which she was fast passing. Seven o'clock. —Dr. J. H. W. Chestnut was called to see her with me. The spasms were less severe, but not lessened in frequency, which was due to her enfeebled condition. Owing to the great exhaustion now existing the only treatment thought to be wise was to continue the whisky hypodermically. The vomiting, however, continued at short intervals. Nine o'clock.—She sank into a semi-unconscious condition, and died at 11.40 A.M. of the same day.

I wish to add, in conclusion, that morphine and chloral produced no effect upon the disease. Curare, in one-third-grain doses, repeated at intervals of one or two hours, had the effect of lessening the intensity of the spasm, but when used at intervals of twenty or thirty minutes entirely controlled it, except when subjected to a sudden atmospheric change or upon attempting to swallow liquids, thereby allaying much suffering.

ABSTRACTS.

OBITUARY.—Dr. Maurice Perrin, President of the Academy of Medicine of Paris, died after a short illness at Vézelise (Meurthe) in the sixty-fourth year of his age. He was a highly-distinguished military surgeon, and was long a professor of surgery in the school of Val-de-Grâce. He had published (1858) "The Physico-Chemical Action of Anæsthetics;" in 1860, in collaboration with Ludger-Lallemand and Leroy, "The Rôle of Alcohol and Anæsthetics in the Organism;" in 1863, "The Influence of Alcoholic Drinks taken in Moderate and Excessive Quantities," and, again in collaboration with Ludger-Lallemand, a "Treatise upon Surgical Anæsthesia." He had also given much attention to diseases of the eye, publishing in 1870 a "Treatise upon Ophthalmoscopy and Optometry," and in 1879, in connection with his pupil, Dr. Poncet, of Cluny, an "Atlas of Deep Affections of the Eye."

He was honorary medical inspector of the Sanitary Service, director of the school of Val-de-Grâce, and commander of the Legion of Honor. He was elected a member of the Academy of Medicine in 1875, succeeding Nelaton, and was elected president in 1889.—*La Tribune Médicale*, September 12, 1889.

CO-EXISTENCE OF DIABETES IN MAN AND WIFE.—Hr. Debove has, in five cases out of fifty, remarked this occurrence. Lecorche has sought to explain the fact by the consideration that the pair subsists upon the same diet and suffers the same anxieties. But the wife's diet is never exactly that of the husband. Gout, for instance, seldom attacks both husband and wife. The question cannot now be settled if, indeed, the co-existence be not accidental.—*Deutsch. Med. Zeitung*, September 16, 1889.

OCULAR MASSAGE.—At the session of the Academy of Medicine, September 10, 1889, M. Costomoris, professor agregé at Athens, contributed a paper upon the history and therapeutics of massage of the eye, especially of the direct massage of the conjunctiva and cornea. He demonstrated that massage had been imperfectly practiced upon the eye by the ancient Greeks. In his practice the procedure had been attended with excellent results in incurable or obstinate ocular affections. Among

these he mentioned acute or chronic follicular conjunctivitis, catarrhal conjunctivitis, œdema, ecchymoses, phlyctenular ophthalmia, gonorrhœal ophthalmia, croupous and diphtheritic ophthalmia, parenchymatous keratitis, infiltrations, abscesses and ulcers of the cornea, opacities of the cornea, etc. He considers, however, that massage has no effect upon internal maladies of the eye.—*La Tribune Médicale*, September 12, 1889.

Chloralamid in Chorea.—In reference to this new hypnotic Dr. Alt, assistant in the Neurological Clinic of Halle, relates the case of a boy, eleven years of age. He had suffered from an aggravated case of chorea, but was almost completely cured in five days by the use of one gramme (fifteen and one-half grains) of chloralamid three times daily. The same was the case with a girl who had been treated with arsenic for fourteen weeks without result. Recovery took place in eight days when placed upon chloralamid. He considers that in this drug we have a desirable addition to our resources. In simple insomnia it occasions sleep without exerting any deleterious influence upon the circulation, respiration, or digestion. It is seldom productive of unpleasant subjective symptoms, and its taste being not disagreeable it is well taken. It is not, however, an ideal hypnotic. Sometimes it fails completely; in other cases its action is delayed.—*Wien. Med. Blätter*, September 12, 1889.

New Remedies.—*Kola Nut.*—The kola tree mentioned in Arabian works of the twelfth century was made known by the researches of travelers in the sixteenth century. They described the kola as a valuable stimulant and nutrient, and in this judgment they have been confirmed by modern travelers. Its fruit communicates an agreeable taste to water or food. Armitroux states that it renders tainted meat edible. It restores impaired energy and increases bodily elasticity. It is employed by the natives as an aphrodisiac.

Therapeutically it may be recommended as a stomachic in hepatic affections and as a preservative or antiseptic to the teeth and gums. It contains a large proportion of caffein, together with tannic acid and theobromin. Other ingredients are sugar, albumen, cellulose, starch, fat, and fixed salts. It is a heart tonic and diuretic. It will prove useful, therefore, in heart-failure, fever, neuralgia, phthisis, dyspepsia, chronic diarrhœa, and cholera; also as an excitant and exhilarant in mental depression. It may be given in the form of tincture, wine, syrup, and essence, pill, elixir, etc.

Further researches upon kola have been made by R. H. Firth, who arrives at the following conclusions: 1. The kola nut is not a nutrient but a remedy. 2. It increases the secretion of urine. 3. It stimulates the nervous system and heart; it prevents the feeling of exhaustion and physical depression from exercise or hunger, although its action in this respect is not so powerful as has been described by some writers. 4. The powder may be used made into an infusion with water or milk as a substitute for tea and coffee, especially when a tendency to diarrhœa is present. 5. It is not of much value in convalescence. 6. Its corrective influence upon impure water is of a purely mechanical nature. The infusion is a suitable form of administration.

Agaricin.—The substance employed of late years under the name of agaracin or agaric acid is proved by the researches of Hoffmeister to be an impure product. Pure agaric acid is a white, light crystalline powder of a silky lustre, which, under the microscope, is seen to consist of four-sided tabular crystals, and crystallizes out of absolute alcohol in groups of tuft-like needles or as distinct rosettes. Hoffmeister determined its melting point at 138° C. (280.4° F.). The free acid is but slightly soluble in cold water, tolerably soluble in boiling water. Upon cooling the acid separates in a fine, crystalline form. Its alkaline combinations are freely soluble, while its heavy metallic salts are insoluble. It is a strong local irritant, and its subcutaneous injection results in active inflammation with the production of pus. Exhibited internally in large doses (0.5–1 gramme = 7½ to 15 grains) it gives rise to vomiting and diarrhœa. In cold blooded animals it produces gradually-increasing paralysis, depression of heart's action, and diminution or complete suppression of the cutaneous secretion. A frog's heart which has been paralyzed by muscarin when removed from the body cannot be started to beating again by agaric acid. In warm-blooded animals, on account of its slow absorption, it produces no grave symptoms. The subcutaneous or intravenous injection of a soluble soda salt first excites then paralyzes the vagus and vasomotor centres.

Death, preceded by convulsions, results from cessation of respiration, or, in animals when artificial respiration is kept up, from the extreme fall of blood-pressure. The influence upon the secretion of sweat is not central, but is exerted upon the secretory glands.

Hoffmeister's investigations give rise to the following practical conclusions: 1. Pure agaric acid should be used. 2. The fear of producing vomiting and purging by the internal administration of this substance is exaggerated. In Professor Kahler's clinic maximum doses of 0.05 grammes (¾ grain) and doses of 0.02 to 0.03 grammes (⅓ to ½ grain) were well borne without exception. Since its antihydrotic activity appears gradually, small doses, repeated, will avert the unpleasant consequences apt to follow a single large dose.

Ural.—Dr. Gustavo Poppi describes under this name a substance obtained by the reaction of chloral hydrate and urethan. He commends it as an admirable hypnotic, which produces a longer and deeper sleep than any other substance belonging to this class of remedies. He affirms that its use is attended by no unpleasant consequences, and that in therapeutic doses it occasions no alteration of the blood-pressure. Such alteration is evidence that a toxic dose has been employed. No uneasiness or weakness is felt when the patient awakes. Its continued use is, according to Poppi, free from danger to health. He has seen it effect excellent results in many cases of heart disease, hysteria, and various nervous disorders, when other hypnotics had failed.

Santoninoxim.—This is proposed by Coppola as a substitute for santonin. It is a crystalline substance, obtained by the action of hydroxylamin upon santonin in an alkaline fluid. It is devoid of toxic properties, and has been found very efficacious as an anthelmintic. —*Deutsch. Med. Wochenschr.*, Sept. 10, 1889.

Antiseptic Treatment of Typhoid Fever in Children.—M. Legroux formulates the following rules: 1. As soon as the malady is established, administer a purgative dose of calomel, 30 to 60 centigrammes (= 4½ to 9 grains) in two portions.

2. Two days later begin with the naphthol, either alone or associated with salicylate of bismuth or salicylate of magnesia. If moderate diarrhœa be present, let two grammes (= 31 grains) beta-naphthol be divided into ten powders, and one powder be taken every hour. If there be excessive diarrhœa:—

℞ Beta-Naphthol,
Bismuth salicylat., āā 2 gms. (= 31 gr.).
M. et div. in chart. no. x.
Sig.: One powder every hour.

3. If constipation exist, substitute the salicylate of bismuth for the salicylate of magnesia, given hourly in the same dose:—

℞ Beta-Naphthol,
Magnes. salicylat., āā 2 gms. (= 31 gr.).
Mix and divide in ten powders. One powder every hour.—*La Tribune Médicale*, Oct. 24, 1879.

Local Action of Helleborein.—Ventruini and Gasparini (Gazz. Degli Ospitali, October 25, 1888) have been studying the action of solutions of helleborein dropped into the conjunctival sac of rabbits. In about fifteen minutes there resulted deep and complete anæsthesia of the cornea, which might be scratched with a needle without the animal manifesting any signs of pain. The experiments were repeated upon dogs with the same result. The pupil, the eyelids, and vision were unaffected.

In another series of experiments, a standard solution of helleborein was used, of such strength that each drop represented one-half milligramme (= 0.0077 grain). Three or four drops of this solution placed upon the conjunctiva of rabbits and dogs produced, within fifteen minutes, such complete anæsthesia that the cornea could be penetrated without causing pain. The anæsthesia lasted a half an hour. The authors believe that helleborein is preferable to cocaine in ophthalmic surgery, because, while causing anæsthesia of the cornea, it leaves intact the sensibility of other parts of the eye and its appendages. The anæsthesia is of longer duration than that due to cocaine. No alteration of the pupil or of the intra-ocular pressure is produced. It causes local insensibility at the point where injected. Since its action upon the heart is strongly toxic, extreme care should be taken in regard to quantities used.—*Deutsch. Med. Zeitung*, October 17, 1889.

Peculiar Action of Duboisin.—Aubone (L'Osservatore, fasc., October 2, 1889) reports the following case: A Spanish merchant æt. 42, of nervous temperament, had suffered for three or four days from pain in the left eye.

The upper lid was so swollen that he had no power to raise it. When raised in the examination, lachrymation and photophobia were marked. Upon the cornea was seen three or four little ulcers which exhibited a tendency to run together. A diagnosis of ulcerative keratitis was made, an ointment of red precipitate ordered, together with a collyrium of duboisin (0.05 to water 10.0), of which two drops were to be instilled as long as the intense photophobia endured. Some hours later Aubone was hastily summoned and learned that after one instillation his patient had been attacked with a strange, indescribable feeling of impending death. The man was pale, giddy, had pain over the heart and hallucinations. The pupil was dilated, the pulse normal, and the condition was at first ascribed to disorder of the stomach, due to some food which had been taken. But the next day the same symptoms followed the use of the eye-wash. The nausea might be accounted for by paralysis of accommodation caused by duboisin, or by disturbed equilibrium of the function of the two eyes, for the collyrium was used but in one. But, on the other hand, the rapid onset and transitory nature of the symptoms, the different and distant nervous disturbances, and the chronology of the symptoms pointed to a peculiar and individual action upon the capillary circulation of the corresponding nerve-centres.—*Deutsch. Med. Zeitung*, October 17, 1889.

Lupus and Tuberculosis of the Eye.—M. Trousseau, of Paris, reported to the Sixth Congress of the French Ophthalmological Society the results of four injections of lupoid material into the eyes of rabbits. He introduced little particles taken from a conjunctival lupus into the anterior chamber in two cases; in the other two, into the lamellæ of the cornea. In three cases definite tuberculosis followed; in one the result was doubtful. The injected material was completely absorbed by the end of the eighth day. Twelve days after absorption the new growth appeared. The tissue of the cornea seemed less favorable to the development of tubercle, and this fact lends color to the theory that lupus and tuberculosis are identical. Tuberculosis of the cornea is less severe, but more chronic than that of the iris. Mild cases of ocular tuberculosis occur, and these are perhaps curable. The disease may remain local, in which case the eye should not necessarily be removed, especially if it is still useful.—*Deutsch. Med. Zeitung*, October 17, 1889.

Syphilis of the Heart.—This is the title of a work recently published by Dr. T. Lang, of Vienna.* The author analyzes the cases which have been observed by himself and reported by others, and treats of the symptoms, diagnosis, prognosis, and treatment of cardiac syphilis.

Syphilitic endocarditis is generally found associated with myocarditis. Differing from non-syphilitic endocarditis, it attacks the valves much less often than the walls of the heart. Its most frequent location is in the left ventricle, at the apex or at the base of the heart near the opening of the aorta. The vegetative or verrucous form is much less common than the fibrous or sclerotic. Gummy endocarditis is usually combined with the fibrous form of syphilitic myo- and peri- carditis. Its clinical symptoms are indefinite and little known. Very often it runs its course without apparent symptoms. The prognosis is unfavorable. Mercury was only administered to robust patients in the secondary stage. In the tertiary period iodide of potassium was employed.

Syphilitic endocarditis is always circumscribed, and rarely occurs prior to the second year after infection. The fibrous form generally attacks the left ventricle, especially at the apex, the anterior wall, and the septum ventriculorum. Its origin is found in the interfibrillar connective tissue. The gummy form is generally associated with the fibrous, and affects all parts of the organ and all the layers of its wall. The tumors may attain the size of a hen's egg or a billiard-ball. As long as the destruction of muscular substance is inconsiderable or compensated by hypertrophy of the intact tissue, and as long—and this the author emphasizes—as the neuromuscular apparatus of the heart is unaffected the myocarditis occasions no considerable functional disturbance. Whether primary syphilitic disease of the cardiac nerves without participation of other tissues ever occurs the author leaves undetermined. Syphilitic myocarditis leads in time, like non-specific myocarditis, to partial aneurisms or to

* Die Syphilis des Herzens. By Dr. T. Lang, prakt. Artzt in Wien. Wien., 1889. W. Braumüller.

atrophy of the affected part. The affection not infrequently continues until a short time before death without producing any notable difficulty. Notwithstanding the lack of valvular trouble emboli and thrombi are frequently formed. In most cases death takes place suddenly from some accidental circumstance, often during or immediately after a movement of the bowels.

Syphilitic pericarditis is rarely primary, but usually follows a myocarditis, and therefore involves especially the visceral layer. But the entire pericardium may be implicated. The chronic or fibrous form leads to the formation of a compact, coarse-fibred tissue, to contraction, deformation of the contiguous surface of the heart, and constriction of the great vessels. Gummy pericarditis is seldom observed.—*Deutsch. Med. Zeitung*, October 21, 1889.

Paresis during Pneumonia.—This was observed in two cases by Dr. B. H. Stephan, of Zaandom, among thirty patients during the prevalence of a severe epidemic of pneumonia. One was that of a man, 43 years of age, who, on the 2d of April, suddenly lost consciousness. He was attacked by tremors of the muscles of the face, arm, and thigh upon the right side. Speech was lost. Consciousness returned in about twenty-four hours. Upon the 3d of April there was some cough, together with bloody expectoration. Upon the following day the physical signs of pneumonia could be elicited. The fever continued until the 20th of April. The aphasia lasted only three or four days. The paresis and vasomotor disturbance (œdema of the right hand) disappeared at the same time as the aphasia, except paresis of the right lower extremity. This symptom did not take its leave until the beginning of July.

The second case occurred in a little girl who was attacked, May 21st, with convulsions and loss of consciousness, high fever, and signs of inflammation of the lower lobe. The convulsions relaxed in a few hours, but unconsciousness remained to the end of life. During the night of May 23–24th the hydrocephalic cry, gnashing of the teeth, and contracture of the neck-muscles were observed. In the course of the next day contracture of the right leg and left arm occurred. On the 27th convulsions again took place; on the 28th ptosis and mydriasis, and on the 20th Cheyne-Stokes respiration. The child died on the 3d of June.

After a comprehensive review of the literature of the subject the author concludes that paresis may develop in the beginning, during the progress of pneumonia, or during recovery. Its origin may be meningitis (cerebral, spinal, or cerebro-spinal) due to the pneumonococcus, or in other cases, in the absence of gross lesion, to functional disturbances of the central nervous system produced by the pneumonic infection.—*Deutsch. Med. Zeitung*, August 29, 1889.

General Argyria Accompanying Cancer of the Larynx.—Dr. Ad. Onodi, docent in Buda-Pesth, relates the case of a man, æt. 40 years, who, on account of hoarseness, had been ordered hy his physician a 10-per-cent. solution of nitrate of silver. This was used, by pencil or spray, with few interruptions, for a year. The hoarseness, however, growing worse instead of better, he sought the surgical clinic of Professor Lummiezer in Buda-Pesth. The skin and the visible mucous membranes were of a bluish color, while even the finger-nails were tinged of the same shade. The false and the true vocal cords of the right side were swollen. Death soon took place, and the autopsy showed the larynx to be the seat of cancer. The blue color was found to affect not only the skin but also the abdominal viscera and the cerebral vessels.—*Deutsch. Med. Zeitung*, August 26, 1889.

Abscess of the Mediastinum.—M. Bousquet reported to the French Congress of Surgery, at its session October 9, 1889, a case in which the opening occurred upon the right side of the neck behind the sterno-mastoid muscle. An incision was made in the line of the vertebral artery and two large drainage-tubes arranged as a siphon were inserted into the cavity. Suppuration continued for two years. The patient made a perfect recovery. The author concludes, in view of the long duration of the treatment, and from an examination of the histories which he has been able to collect, that it would be proper to trephine the sternum in order to afford exit to the pus from the most dependent part of the abscess cavity.—*La Tribune Médicale*, October 17, 1889.

GUMMATA OF THE HEART.—Upon this subject we find an article in a French cotemporary,* an extract from a memoir crowned by the Academy of Medicine in 1888. The scope of the work is more restricted than that of Dr. Lang. Its author is Dr. Henry Feulard, chief of clinic at the Hôpital Saint-Louis. The conclusions of the French agree, in the main, with those of the Austrian writer. Justice to an independent work, however, requires notice of that of Dr. Feulard. This authority has minutely analyzed the published accounts of gummy tumors of the heart. He concludes that but twenty cases can claim to be regarded as undoubted evidence of the lesion in question. The two sexes seem to be equally affected. The age of the patient has varied extremely. The lapse of time since the initial lesion has extended from one year in a case described by Hutchinson to eighteen years in one reported by Morgan. The tumors have differed vastly in size; some have been small nodules, while others have been as large as a hen's egg or an apple. Out of 19 cases both ventricles were affected in 4, the left ventricle in 6, the right ventricle in 3, the wall of the heart in 4, and the right auricle in 2. Sometimes the gummata are imbedded in the midst of healthy surrounding tissue; at other times they co-exist with sclerosis, endocarditis, or pericarditis. In some cases sudden death has resulted without any symptoms having occurred during life; in others the patients have succumbed with the symptoms of grave cardiac disease, extreme dyspnœa, and severe palpitation.

EXTRA-GENITAL CHANCRES.—During the ten years from 1878 to 1887 inclusive Prof. A. Pospelow, of Moscow, met with 198 cases in which the initial lesion of syphilis was seated elsewhere than upon the sexual organs. It occurred upon the lip in 49 cases (in 20 men and 29 women); upon the gums in 1 (a man); the tongue in 3 (1 man, 2 women); the throat in 46 (14 men, 32 women); the breast, 69 (all women); the chin in 1 (a woman); the eyelids in 3 (men); the nose in 1 (man); the trunk in ten (5 men, 5 women); the upper extremities in 6 (3 men, 3 women); the lower extremities—thigh, nates, 4 (women).—*Deutsch Med. Zeitung*, October 21, 1889.

* Annales de Thérapeutique Medico-Chirurgicales, August, 1889.

MOUSSENA, A NEW TÆNIACIDE.—Moussena is an Abyssinian tree, the botanical designation of which is Acacia anthelmintica, belonging to the natural order Leguminosæ. The bark, according to Thiel, contains a saponaceous substance—moussenin. It is said to be more efficient and palatable than kousso. It may be given in the dose of thirty to sixty grammes (seven and one-half to fifteen grammes) of the powder mixed with honey or milk. Or a concentrated infusion of the bark may be used in the dose of thirty grammes.—*Deutsch. Med. Zeitung*, August 29, 1889.

A USEFUL GALACTAGOGUE; "NUTROLACTIS."—Dr. Robert Millbank, in the New York Medical Journal, speaks as follows of nutrolactis:—

A little over a year ago my attention was called to a combination of drugs, said to be *Galega officinalis*, *Galega apolinsa*, *Tephrosia virginica*, and sold under the name of "nutrolactis." The recommendations from some of those who had used it gave ground for believing that, notwithstanding my skepticism on the subject, it ought to have a fair trial. I offered to give it such a test during my service at the New York Infant Asylum, provided a sufficient quantity should be sent to the asylum at the expense of the makers, to settle the question as to its practical use.

Having had occasion to try about every galactagogue used by the profession, and having often been disappointed in the results, as many of my friends have been disappointed, I am glad to report that after more than a year's use it has been more satisfactory than any galactagogue I have hitherto employed.

I have thought it might be of interest to quote from the history books of the asylum a few cases taken in order without selection.

Lottie G., aged one year, gained half a pound in eight weeks, during which the mother took nutrolactis. The child had previously been losing weight.

Bernard R., aged eight months, wet-nursed. Nurse has been taking nutrolactis; no gain

Edward E., aged eight months. Mother took nutrolactis for eight weeks; gain, four ounces. Has had in the meantime a severe attack of enterocolitis.

Dr. Millbank also gives a number of other cases, showing the value of this preparation.

We have had several women whose supply

of milk was insufficient, but after taking nutrolactis they have been able to nurse two children.

The women who take it all say that it positively adds to their flow of milk. As it is not particularly agreeable to take, containing little alcohol, I believe that their praise of it is not due to bias on account of palatability, and, as the facts in our tests seem to bear them out, I believe their statements. The class of mothers and children which come under our care is one to which such a medicine is peculiarly valuable. and after a year's use I am much pleased with the results.

We are now using about a dozen bottles a week. The dose is a tablespoonful two or three times daily. I hope that its use will be of benefit in the hands of some of my brethren who may be tempted to try it from what I have said about it.

An Aid to the Recognition of Beginning Tabes.—At a meeting of the Medical Society of Kottbus, Hr. Thiem remarked that, although we recognize in tabes the three stages of sensory disturbances, ataxia and paresis, yet the ataxic period is the most characteristic. The lancinating pains of the first stage are often mistaken for rheumatism or neuralgia. Likewise, the objective symptoms of this period, absence of patellæ reflex (Westphal) and reflex fixation of the pupil (Robertson) are not always conclusive, since the former may be present in those who are not tabetic, and the latter is not always present. It would, therefore, be of great assistance were we able to elicit evidence of ataxia in the early stage of the disease. Thiem lately remarked in a tabetic woman, whom he had put under the influence of chloroform in order to examine a supposed abdominal tumor, that, as she was led out of the room still partially affected by the anæsthetic, the ataxic gait was beautifully manifested. Other half-narcotized individuals never exhibit this gait, but simply drag the limbs. The speaker demonstrated the fact before the society, his patient having in the meantime been anæsthetized. The ataxia is due, not to paresis, but to want of functional activity of the apparatus which regulates coordinated movements.

The speaker recommended further trial of this method of forming an early diagnosis.—*Deutsch. Med. Zeitung*, October 24, 1889.

Lupus of the Mucous Membranes.—Dr. Max Bender has published statistics from the clinic of Professor Doutrelepont, of Bonn. According to these lupus vulgaris affects mucous membranes—and even as a primary disease—more frequently than has been hitherto supposed. Among 380 cases treated during the last six years in 173 (= 45.5 per cent.) the mucous membrane was involved. Of this number only 147 cases could be used in attempting to determine the origin of the disease. Mucous membrane was attacked first in 46 cases (= 31.2 per cent.). In the remaining 101 cases the integument was the seat of primary localization. In regard to its comparative frequency in different mucous membranes it appeared in that of the nose in 115 cases, of the lips in 43, of the palate in 31, of the nasal duct in 24, conjunctiva in 21, larynx in 13, tongue in 1, rectum and external genitals (female) in 1 case. Of the 173 patients, 167 suffered from lupus of both the skin and mucous membrane; in only 6 was the mucous membrane alone affected.—*Deutsch. Med. Zeitung*, November 7, 1889.

THERAPEUTIC NOTES.

MECHANICAL DYSMENORRHŒA.

Excellent results are obtained by the following prescriptions, which Goodell recommends:—

℞ Ammonii bromidi, . . ʒij.
Potassii bromidi, . . ʒiv.
Spts. ammoniæ aromat., . fʒvj.
Aquam camphoræ, . ad fʒvj.

M. Sig.: One dessertspoonful to a tablespoonful every two to four hours.

℞ Spiritus ammoniæ aromat.,
Spiritus ætheris comp., āā fʒj.

M. Sig.: One teaspoonful to a dessertspoonful every two to four hours.

When the pure nervines fail, the next resort is to the hypnotics, and of these opium in some form takes rank. Rectal suppositories, containing one grain of the extract of opium and half a grain of extract of belladonna, are familiar remedies to most physicians. The effect of the combination of the nervines with narcotics is often happier than the administra-

tion of the latter alone. Another prescription which Goodell employs is as follows:—

℞ Chloralis, ... 3ij.
Potassii bromidi, . . 3iv.
Aquæ camphoræ, . . f℥vj.

M. Sig.: One tablespoonful every two to four hours.

To this mixture, when the uterine colic is very acute, also add two or three grains of morphia.—*University Medical Magazine.*

TREATMENT OF DIPHTHERIA.

Dr. Jules Simon, who has written much on the treatment of diphtheria in young children, has recently visited this country. It appears he is opposed to the use in this disease of mercurials, of chlorate of potash, of borax, of opium, and of emetics. The treatment which he advocates is chiefly local, and consists of energetic swabbing made every hour with the following solution:—

℞ Salicylic acid, . . 0.5 to 01 grams.
Alcohol q.s.to dissolve,
Glycerin, . . . 40 "
Infusion of eucalyptus, 40 "

The same practitioner also prescribes touching the pseudo-membrane, when very thick and adherent, with a mixture of equal parts of glycerin and perchloride of iron, this application to be made two or three times a day. He also recommends sprays of eucalyptus and thymol. For nasal diphtheria the application of a mild sulphur ointment, 1 part to 7, is likewise recommended. To combat the glandular enlargement and engorgement he has the following, well rubbed in:—

℞ Ext. of belladonna, . . 2 parts.
Iodide of potassium, . . 1 "
Lard, ... 30 "

—*Journal Amer. Med. Association.*

A CURE FOR DANDRUFF.

Dr. A. J. Harrison, of Bristol, recommends the following salve for dandruff:—

℞ Caustic potash, . . . 8 grains.
Phenic acid, . . . 24 "
Lanolin,
Cocoanut oil, . . āā 3iv.—M.

This preparation should be rubbed into the scalp morning and evening. Complete cure is usually effected in one to three months.—*La Progrès Méd.; Times and Register.*

GONORRHŒAL RHEUMATISM.

℞ Liquor. plumbi subacetatis, 3j.
Extracti belladonnæ, . . gr. x.
Extracti opii, . . . gr. x.

Misce. et fiat unguent.

Sig.: Apply locally to the joint.—*Ibid.*

THE TREATMENT OF PHTHISIS.

Dochman and other German doctors give it—they say with success—in phthisis. The method used consists in giving it in decreasing doses; the first day twelve pills, then ten, nine, eight; and then for two months give six pills for three days in each week. The following formulas are given. The first one is used when there is gastric trouble, the second when hæmoptysis, and the third when cough is present:—

℞ Calomel, . 60 centigrammes.
Pepsin, . . . 3 grms. 50 centigrms.
Tinct. opii, . 30 drops.
Ext. phyllandrium aquat., q. s.

M. For sixty pills.

Sig.; Give two every two hours.

℞ Calomel, . 60 centigrammes.
Pepsin, . . 3 grms. 50 cent.
Ergotin, . . . 10 centigrammes.
Powd. licorice, q. s.

M. For sixty pills.

Sig.: Same dose.

℞ Calomel, . 60 grammes.
Pepsin, . . 3 grms. 50 cent.
Ext. hyoscya., 30 grammes.

M. For sixty pills.

Sig.: As above.—*Ibid.*

MERCURY HYPODERMICALLY.

℞ Oxybenzoate of mercury, . gr. ivss.
Distilled water, . . . 3x.
Chloride of sodium, . . gr. ¼.
Hydrochlorate of cocaine, . gr. ij.—M.

—*Revue de Thérapeutique; ibid.*

TUBERCULOSIS.

℞ Eucalyptol, ... 20 grms.
Ess. turpentine, . . . 20 "
Creasote, ... 20 "
Iodoform, ... 0.50 "
Ether sulph., . . . 5 "

Dissolve the iodoform in the ether, and mix.

Sig.: Use, by inhalation, in from two to three days.—*Ibid.*

REMEDIES FOR SLEEPLESSNESS.

The following useful formulæ for the administration of hypnotics were given in a recent number of the *Deutsche Med. Wochenschrift:*—

℞ Amylen. hydrat., . . . gr. cv.
Aquæ destil., . . . f℥ij.
Ext. glycyrrhizæ, . . . ℥iiss.

M. Sig.: Half to be taken in the evening before going to sleep.

℞ Amylen. hydrat., . . . ♏lxxv.
Mucil. acaciæ, . . . f℥v.
Aquæ destil., . . . f℥iss.

M. Sig.: For a clyster.

℞ Chloralis, ... ℥j.
Aquæ destil.,
Syr. cort. aurant., . . āā f℥x.

M. Sig.: Dose, one to two tablespoonfuls.

℞ Chloralis, ... gr. xlv.
Potass. brom., . . . gr. lxxv.
Aquæ destil., . . . f℥iij.
Syr. aurantii, ... f℥iss.

M. Sig.: The third part to be taken once, in the evening.

℞ Lactucarii, ... gr. ix.
Gum acaciæ, . . . ℥j.
Aqua destil., q. s. fiat emulsio, f℥vj.
Adde:
Syr. aurantii, ... f℥j.

M. Sig.: A tablespoonful every hour.

℞ Paraldehyde, . . . f℥j–f℥iss.
Aquæ destil., . . . f℥iij.
Syr. simplicis, . . . f℥iiss.

M. Sig.: Half to be taken once.

℞ Phenacetin, . . . gr. viiss–xxiij.

M. Dispense doses tales no. vi.
Sig.: One powder in the evening.

℞ Sulphonal, . . . gr. xv–xxx.

Divide in five equal parts.
Sig.: One powder in *cachets* in evening.

℞ Urethan, ... f℥j.
Aquæ destil., ... f℥x.
Syr. aurantii, ... f℥v.

M. Sig.: To be given in tablespoonful doses at intervals of one-half to one hour, according to desired effect.—*Wiener Med. Presse; Med. and Surgical Reporter.*

SCABIES.

The following mixture is used in the treatment of scabies:—

℞ Creolin, ... 1 part.
Peruvian balsam, . . 20 parts.
—*London Medical Recorder.*

TÆNICIDES FOR CHILDREN.

Descroizilles and Duchenne suggest the following formulæ for the administration of tænicides to children:—

℞ Ext. felicis maris fl., . f℥ss–f℥iij.
Ess. anisi, . . . ♏x.
Aquæ menth. pip., . . f℥ss.
Aquæ anthemidis, . . f℥j.
Syrupi,
Syrupi aurantii cort., āā f℥vj.—M.

℞ Ext. felicis maris, fl., . f℥j.
Hydrarg. chlor. mitis, . gr. vij.
Sacchari, ... ℥ij.

Gelatin q. s. to make a jelly of a proper consistency.—*London Medical Recorder; ibid.*

PILLS FOR METRORRHAGIA.

℞ Pulverized ergot, . . . 75 grs.
Subcarbonate of iron, . . 75 "
Sulphate of quinine, . . 15 "
Extract of digitalis, . . 7 "

M. Sig.: Mix and make into fifty pills, of which two may be taken three times daily.—*L'Union Médicale; Medical News.*

PARASITICIDE OINTMENT.

℞ Salicylate of mercury, . . 16 grs.
Vaseline, ... 1 oz.—M.

This makes not only an excellent ointment against the parasitic skin diseases, but against eczema, pityriasis, and syphilitic vegetations.—*L'Union Médicale; ibid.*

PRESCRIPTION FOR TOOTHACHE.

℞ Arsenious acid, . . . 15 grs.
Muriate of cocaine, . . 15 "
Crystallized menthol, . . 3½ "
Glycerin, ... 2 dr.—M.

A pledget of cotton moistened with this and placed in the cavity of the tooth will quickly check the pain.—*L'Union Médicale; ibid.*

SOLUTION FOR BLEPHARITIS.

℞ Sulphate of zinc, . . . 15 grs.
Rose water, ... 2 fl. oz.
Distilled water, . . . 5 " —M.

A compress of soft linen or a small sponge is to be soaked in this solution, and placed over the affected eye.—*L'Union Médicale; ibid.*

INSUFFLATION FOR WHOOPING-COUGH.

℞ Pulverized benzoin, . . 10 grs.
Salicylate of bismuth, . . 10 "
Sulphate of quinine, . . 2 " —M.

A pinch of this may be insufflated into the nasal cavities every few hours.—*Lyon Médicale; ibid.*

TREATMENT OF VENEREAL WARTS.

A writer in the British Medical Journal recommends the following:—

℞ Pulv. sabinæ recent. cupri subacet., . . āā ʒj.
M. et ft. pulv.

It is an old remedy, but very effectual. Salicylic acid also rapidly removes them when applied in powder.

SALOL IN BURNS.

The favorable influence of salol in burns, communicated by Tato and Cabatelli, has probably also to be explained by the action of lanolin, with which the authors combined salol as a 3-per-cent. ointment. The addition of salol or ichthyol to lanolin he thinks unnecessary for the said purposes.—*Provincial Medical Journal*, Halifax, England.

CHLORAL HYDRATE IN SCARLET FEVER.

As a rule, the drug is easy of administration, and well borne by the stomach. Wilson says: I have found its acrid after-taste best marked by the administration in Aubergier's syrup of lactucarium, diluted, thus:—

℞ Chloralis, ... gr. xxx.
Syr. lactucarii (Aubergier),
Aquæ, . . . āā ʒiss.
M. Sig.: A teaspoonful in iced water every two, three, or four hours.

The administration of nourishment immediately after the medicine is desirable. The sleep-inducing properties of the drug manifest themselves rapidly, but are not prolonged; therefore, its repetition at intervals of two or three hours is called for.—*Medical News.*

SALOL IN GONORRHŒA.

Dr. Dreyfous has treated seven cases of gonorrhœa with salol. The doses varied from five, seven, to eight grammes. The discharge was less abundant. In a recent case, in which gonorrhœa appeared some time before seeking advice, Dr. Dreyfous obtained a complete cure in a few days. M. Dreyfous has tested the effect of salol administered alone, and in other instances he has given it simultaneously with copaiba and cubebs in order to hasten the cure. He recommends the use of salol to surgeons who operate on the urinary organs; it renders urine aseptic, which is thus innocuous when in contact with raw surfaces. Aseptic and antiseptic conditions result from giving salol internally.—*British Medical Journal.*

ERYSIPELAS.

Dr. Koch treated numerous cases of erysipelas with the following ointment:—

℞ Creolin, ... ʒj.
Iodoform, . . . ʒiij.
Lanolin, ... ʒj.

This ointment is spread as an even smooth layer over the affected skin and its surrounding, on an area of at least two to three inches to the outside of the inflamed parts. The whole is covered by a piece of mackintosh. Dr. Koch selected creolin in the above prescription, because he thought that it was possessed of first-class disinfectant properties, without sharing the dangerous after-effects of carbolic acid. Iodine, which is derived from the decomposition of iodoform, stimulates absorption of inflammatory products. Lanolin has been chosen because it penetrates the skin best of all ointment bases.—*Provincial Medical Journal*, Halifax, England.

CODEIN IN DISEASES OF WOMEN.

The Therapeutische Monatshefte contains an article by Dr. Freund, of Strasburg, on the use of codein in diseases of women. The author was induced through the publications of Lauder-Brunton to try codein in gynæcological practice, and, although not confirming everything that Lauder-Brunton has stated, he nevertheless obtained favorable results. He gave it in abdominal pain produced by uterine and allied complaints, with very marked and rapid effect, especially if the pains started from the ovaries. The usual dose was followed, namely, half a grain three times a day in pills. In several cases the use of the drug was continued for months without any ill effects arising. —*Provincial Medical Journal*, Halifax, England.

SALOL AS A DUSTING POWDER.

Dr. Kiezer publishes an interesting paper on the use of salol as a dusting powder. He applied it in the following combination:—

℞ Salol, ... ʒj.
Amylum powder, . . ʒj.

A varicose ulcer, in which all kinds of treatment had invariably been tried, was nearly completely cicatrized six weeks after the first application of salol. Six other cases of ulcerated leg were treated with salol dusting powder; in all of them except one the success was

equally marked, as in the first case. Excellent services were also rendered by the dusting powder in cases of sycosis, burns, scalds, wounds, defects of the skin, etc.—*Provincial Medical Journal*, Halifax, England.

SOMNAL.

A new hypnotic, which has been named somnal, is described in a Berlin pharmaceutical journal by Herr Radlauer, who states that, chemically speaking, it is ethylated chloral-urethan, its formula being $C_7H_{12}Cl_3O_3N$. It has a melting-point of 42° C., and boils *in vacuo* at 145° C. It is not acted upon by nitrate of silver or by acids, and can be prescribed in half-drachm doses, dissolved in water with a little syrup of some kind. As a rule, a dose such as this acts in about half an hour and produces six or eight hours' sleep. No unpleasant after-effects have been observed. There appears to be no interference with the digestive, circulatory, or respiratory organs, so that, according to the writer, the new drug has all the advantages of chloral without any of its disadvantages.—*London Lancet.*

NEURASTHENIA.

℞ Ferri sulphatis, . . gr. ij.
Potassi et sodii tartratis, . ʒij.
Magnesii sulphatis, . . gr. xx.
Aquæ, ... Oij.
M. Sig.: A wineglassful every morning.
—WOODBURY.

EFFECT OF ALCOHOL ON THE SECRETION OF BILE.

Dr. Cheltsoff publishes in the Ejenedêlnaya Klinicheskaya Gazeta an account of some experimental observations on dogs, undertaken with a view of determining the nature and amount of the influence of alcohol upon the secretion of bile. He made biliary fistulæ in the animals, and after all the disturbance caused by the operation had passed off he proceeded to observe the effect of introducing alcohol in various quantities into the stomach. The bile as it was secreted was collected in glass receivers, which were changed every few minutes, the contents being measured, weighed, and otherwise examined. The results showed that small quantities of alcohol either have no perceptible effect on the bile or serve to increase it slightly. Large doses, on the other hand, perceptibly diminish the flow, though sometimes there is at first a temporary increase. Medium doses do not give any constant result. Dr. Cheltsoff has come to the conclusion that the alcohol acts directly on the hepatic cells. —*London Lancet.*

ENTERITIS AND ENTERE COLITIS.

Whenever purgation is omitted as an initial treatment in enteritis, a very bad start has been made which will necessitate a return to it later with less possible advantages:—

℞ Magnesia sulp., . . ʒiv.
Inf. rosarum co., U.S.P., . ʒxxxij.
Tr. opii, ... ♏viij.
M. ft.
Sig.: Take a teaspoonful every two hours. For an infant of one or two years.

If further treatment is necessary the following is successful in the largest number of cases:—

℞ Acid. nitrosi, . . . ʒss.
Tr. opii, ... ♏xx.
Syr. zingiberis, . . ʒj.
Aquæ camp., . . . ʒiij.
M. ft.
Sig.: Teaspoonful every two hours.

As soon as the disease assumes the chronic form without fever, which it will not do if treated as above, nitrate of silver, as follows, is invariably the best treatment:—

℞ Argent. nitratis, . . gr. ij.
Tr. opii camp., . . ʒij.
Syr. acaciæ, . . . ʒj.
Aquæ camp., . . . ʒij.
M. (black bottle.) Sig.: Teaspoonful every two hours.

For attacks accompanied by gastric symptoms, properly called gastro-enteritis with the characteristic malodorous stools, carbolic acid with potassium of chlorate in distilled water is a wonderfully good prescription; also, salol in two- to five- grain doses; beta-naphthol, and small and frequently-repeated doses of calomel, or a solution of mercury bichloride in very small doses, from $\frac{1}{480}$ to $\frac{1}{1200}$ grain doses; also, very dilute solution of the biniodide, in solution. The latter often acts like a charm in $\frac{1}{60}$ grain doses.—J. A. LARRABEE, M.D., Louisville, Ky.

FOR AURAL FURUNCLE.

℞ Menthol, ... gr. xv.
Ol. amygdalæ dulcis, . ʒv.
M. Sig.: Introduce twice daily on borated cotton.—CHOLEWA.

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Philadelphia, Jan., 1890.

THE INFLUENCE OF LAYMEN UPON THERAPEUTICS.

AT the bottom of every widespread and persistent popular tradition lies, perhaps, a grain of truth, if one be philosophical enough or patient enough to separate it from the rubbish by which it is hidden. The delvers in folk-lore have of late years drawn valuable and interesting information from old saws, customs, tales, or superstitions. Medicine has from time to time derived drugs and manipulative methods from peasants and savages, whom slow, laborious experience had taught some important truths or half-truths. Especially in former times and in the pre-scientific period was medicine thus influenced. We are told by Herodotus that the Babylonians were obliged by law to carry their sick to places of public resort, that whosoever, passing by, should know of remedies successful in similar cases might have the privilege of communicating his knowledge to the friends of the patient. The introduction of powerful drugs has often been due to travelers, missionaries, and others whose occupations called upon them to visit strange lands. Who does not remember cinchona bark, Countess' powder, Jesuits' bark, Culver's physic? In regard to drugs obtained from distant and uncivilized regions, we necessarily depend upon those who first became acquainted with those countries, their natives, customs, and productions. It would seem that every district except Central Africa had by this time been searched by eager students, yet the past decade has provided us with a number of remedies which we would not readily consent to lose. The immortal discovery of Jenner should teach us never to contemptuously dismiss without examination a vulgar belief. In our times Science does not hold itself too lofty to explore any dark nook in the search for truth.

It seems surprising, nevertheless, that several of our most efficient therapeutical measures have been introduced or popularized by laymen, and, stranger still, that their introduction was vigorously resisted or passively obstructed by the medical profession. This is true of hydrotherapy, massage, and electricity. Water was justly valued by the ancients on account of its remedial no less than its cleansing virtues. The recovery of Augustus commemorated by Horace was due to hydro-therapy. Galen made use of baths in his practice, as did others among the ancients whose names it is not necessary to cite. After the Revival of Learning, in spite of the recommendation of Cardan, Floyer and Currie, Hahn, Michaelis and Hegewisch, the use of water in the treatment of illness never came to be generally appreciated until the remarkable success of a Silesian peasant. The bold innovations of Priessnitz startled the profession; his want of science repelled it, but it was at least awakened to a realization of the curative virtues possessed by water. Even yet, however, we believe that water is far too seldom and too timidly employed as a remedy.

Masso-therapeutics has much the same history as hydro-therapeutics. The instinctive rubbing of a painful spot is the germ of massage, and rude manipulations have been practiced in many ages and among many peoples. The success of Grosvenor was forgotten and massage had to be revived by teachers of gymnastics. Thure Brandt, whose method of treating prolapsus uteri seems to be attended by considerable success, is, if our memory serves us, an ex-major, long an attaché of an institution devoted to the Swedish movement-cure.

A very general, if ignorant, appreciation of the powers of electro-therapeutics has been diffused in the popular mind, chiefly by lay enthusiasm. Who shall venture to say that this method is properly esteemed by medical men? Its remedial or curative powers should be much more frequently invoked. Every young physician should be as competent to administer a proper dose of a proper form of electricity as one of laudanum, nux vomica, or castor-oil.

The poet tells us that "fools rush in where angels fear to tread." Laymen are not fools,

nor all doctors angels, yet the spirit of the verse may serve to point our moral. A keen sense of responsibility will often restrain the physician from employing what seems to him a hazardous method. The layman, with the boldness bred of ignorance, performs the experiment, and sometimes widens the bounds of therapeutics.

THE VARIETIES OF LICHEN.

AN International Congress of Dermatology and Syphilography held its sessions in Paris from the 5th to the 10th of August, 1889. It was opened by the honorary president, M. Ricord, whose death the entire medical world has since been called upon to deplore. More than two hundred specialists, from various lands, were present. M. Hardy announced that the Committee of Organization had proposed six questions for discussion. The first of these related to the constitution of the group lichen. The remaining problems to which the attention of the Congress was invited concerned the nature and relationship of several forms of dermatitis or erythema characterized by exfoliation, the varieties of bulbous eruptions, the forms of tinea trichophytina, the treatment of syphilis, and the relative frequence of tertiary syphilis. An account of the range taken by the discussion of the first question, and the views expressed by different participants in the debate, will consume the available space of this issue. In succeeding numbers we shall summarize the later proceedings. We are indebted for our report of transactions to our valued contemporary, Le Progrès Médical.

Diseases of the skin certainly present one advantage to the student in that they are constantly open to observation. We are not called upon to surmise or infer, but may satisfy ourselves at any time of the appearance and progress of the disease. We are also thus enabled to trace closely the effect of our remedies. On the other hand no department of medicine has suffered so much from a multiplication and confusion of nomenclature. The simple classification of the older dermatologists has been forcibly extended to cover manifestations totally different from each other and from that upon which the common title was originally bestowed. As experience widened and a knowledge of pathology increased, new disorders were observed and studied, and were often classified so injudiciously as to be confused with other and distinct affections. To add to the difficulty, some divergence of nomenclature has obtained in different countries, so that the same disease may be differently entitled in England, France, or Germany. The whole subject of dermatology is thus rendered additionally puzzling to the student. This is to be regretted, but in the development of this branch of our art has been inevitable, and perhaps has furnished an incidental advantage in stimulating observation. It should seem, however, that the time had now arrived when specialists might agree upon a uniform nomenclature and abandon a great number of synonyms which have gradually accumulated.

The name lichen, more than any other, has been far too widely and vaguely employed. Papules appear in the course of various maladies, and it must be irrational to include them all under one term, even if qualified by appended adjectives.

The discussion of the first question was opened by Kaposi, of Vienna, who recognizes but two forms of lichen, l. ruber and l. scrofulosus. He believes that acuminatus and l. planus are but varieties of l. ruber and not distinct diseases. M. Hallopeau, of Paris, considers that the name should be restricted to the affection described by Wilson, and that l. planus is but a form of that malady. He would prefer a distinction between an acute and chronic form, placing in the latter cases which have been designated as l. planus, l. obtusus, acuminatus, tuberous, corneous, and sclerous. The acute form would include many of the cases considered as l. ruber acuminatus. This authority looks upon l. scrofulosus as nothing more than a seborrhœic eczema developing in a scrofulous subject. Unna, of Hamburg, denied that the l. acuminatus of Kaposi was identical with that described under the same name by Hebra, the latter being, in the speaker's opinion, a trophoneurosis. Professor Schwimmer, of Buda-Pesth, would distinguish two varieties of l. acuminatus, one—that of Hebra—being a grave, constitutional malady, the other—that of Wilson—being mild. He would likewise recognize two varieties of l. planus.

Besnier, of Paris, approves the retention of the name lichen, but concludes that we should follow Hebra's efforts to distinguish the true from the false lichen. The true lichen is that depicted by Wilson under the name of l. planus. Besnier regards it as undeniable that a certain number of the cases classified as l. planus are really l. ruber, and hence has arisen the division of Hebra and Kaposi into l. ruber and l. planus. This observer would regard the grave constitutional malady described as l. ruber by Hebra, as being not a single affection, but that the papular eruption pertained to or co-existed with several distinct affections.

As if the subject were not already sufficiently embarrassed, the point has been raised whether the pityriasis rubra pilaris of Devergie should be included among the lichens,—whether this malady is, in fact, different from the l. acuminatus of Hebra. Hano Hebra defended the identity of the cases which had been classified by his father as l. acuminatus. The patients suffered from albuminuria, failed in general health, and the cases terminated in death. Pityriasis r. pilaris, on the contrary, is a benign affection. Again, the lesions of l. acuminatus may appear upon mucous membrane, as that, for instance, of the mouth or the vagina. Other diagnostic points were added by M. Boeck, of Christiana. M. Besnier likewise regarded the two as distinct processes. It was, in fact, generally agreed that l. acuminatus of Hebra and pityriasis rubra pilaris of Devergie are different diseases, although in some cases they resemble each other very closely.

Unanimity, of course, could not be expected in a large body, so that the deliverances of the Congress cannot be regarded as authoritative. There is indicated, however, we think, a reasonably fair accord of opinion among the members. Neither lichen planus nor l. ruber is often seen in this country, while the grave and fatal form is almost unknown.

A BAD CASE.—*Miss Luendi* (bursting into the doctor's office)—"Doctor, doctor, you must come down to the house at once!"

Doctor—"Why what's the matter? Who's sick?"

Miss Luendi—"I am. But, as there was no one to send, I came myself."—*Harper's Bazar.*

CORRESPONDENCE.

WILD YAM (DIOSCOREA VILLOSA) IN GALL-STONE COLIC.

Editor of the Medical Bulletin:

DEAR SIR—I read with pleasure your Newport article, published in the Journal of the American Medical Association, September 21st, relative to the dioscorea villosa.

The next day after I received the Journal I was called to see, in consultation, a gentleman at a distance, said to be suffering from gall-stone colic. The treatment of such cases being, for the most part, somewhat unsatisfactory, I took with me a two-ounce vial of the fluid extract of the dioscorea.

I found a middle-aged man who had been ill three weeks, during which time he had had numerous severe and painful attacks of hepatic colic, and had passed a few calculi. He was quite yellow, and had a tumor at the lower border of the liver which was recognized as the distended gall-bladder.

He was prescribed twenty drops of fluid extract of dioscorea every three hours, which he he took for a week; afterward, three times a day.

He had no more pain; in a week he had passed over two hundred calculi, from the size of a pea to the size of a small shot. The jaundice had disappeared. In ten or twelve days he was well. If the dioscorea is generally as successful as in this case, you have done the profession a good service in bringing it to their attention.

Yours, very truly, J. L. TEFFT.

MEDICAL NEWS AND MISCELLANY.

NAUSEA may be relieved by applying cold to the back of the neck.

THE first Swedish lady doctor has commenced practice in Stockholm.

A THIRD of the deaths in the French army are said to be due to typhoid fever.

NEARLY half the medical students in the Boston University of Medicine are women.

DR. J. P. HOFFA, of Montour County, was in Philadelphia last month on a short visit.

PROF. SAMUEL B. HURCELL has removed to 321 South Sixteenth Street, Philadelphia.

DR. F. P. HUNSKEEPER has removed to Philadelphia, and located at 3406 Powelton Avenue.

DR. WILLIAM ATLEE, of Lancaster, died some weeks ago of typhoid fever in Washington, D. C.

Dr. Henry Brubaker died at his home in Somerset, Pennsylvania, on the 12th of November.

Typhoid fever and diphtheria are now the leading complaints in many parts of the Lehigh Valley.

At a Railroad Restaurant.—"Waiter, bring me the stomach time-table."—*Fliegende Blätter.*

Drs. J. P. and George T. MacCord, of Pittsburgh, Pa., paid a visit last month to Philadelphia.

The night air is not necessarily bad unless it is sung by a cat, and prevents sleep.—*Women's Journal.*

It has been estimated that the habitual opium-eaters in the United States number six hundred thousand.

Henry Butlin's work on "Diseases of the Tongue" has been translated into French by Dr. Douglas Aigre.

Dr. A. E. Roussel has been appointed Demonstrator of Physical Diagnosis at the Medico-Chirurgical College.

"Nothing will sweeten the breath equal to plain old-fashioned willow charcoal," said a frank down-town dentist lately.

An anti-opium league has been formed in Holland for the purpose of restraining the sale of opium to the natives of Java.

Many ladies are making their own lip-salve by melting the fat of mutton and mixing in some rose-water to kill the sheepy scent.

According to a Norwegian work on longevity the average duration of life in Norway is 48.33 years for males and 51.30 for females.

Cremation is coming more and more into vogue in Germany. At Gotha one hundred bodies have been cremated since January 1st.

The Eighth Congress of Russian Naturalists and Physicians will be held at St. Petersburg from December 27, 1889, to January 7, 1890.

Diphtheria is epidemic in a portion of Martic township, Lancaster County, and the school in that vicinity has been closed in consequence.

Millionaire Shoenberger's will bequeathes $800,000 for a hospital bearing his name in Pittsburgh, with eight acres of ground, near the city.

A Positive Cure for Obesity.—

Here is a certain anti-fat
We don't object to giving.
'Tis—take to writing paragraphs
And jingles for a living.

Dr. Robert Newman, of 68 West Thirty-sixth Street, New York, paid a visit recently to Philadelphia, and called upon a number of his friends.

In one of her recent lectures on ancient Egypt, Miss Edwards tells of a king who acquired imperishable fame by the invention of a hair-restorative.

There are enough relics and exhibits of value stored away unpacked at Washington to fill another building of the size of the present National Museum.

German chemists have discovered in the cocoanut a fatty substitute for butter, and this new product has begun to be manufactured on a large scale.

Dr. F. O. Donohue has been named a member of the Syracuse Board of Health by Mayor Kirk, and also of the New York State Board by Governor Hill.

A grateful patient recently presented to a church in the neighborhood of Vienna a portrait of the celebrated Professor Bilroth, representing him in the operating-room.

It is stated that the new French Chamber of Deputies contains forty-seven M.D.s, one *officier de Santé*, one veterinary surgeon, one dentist, four pharmacists, and one chemist.

Dr. J. G. Person has removed from Fremont, N. C., to Luling, Texas. He leaves many warm friends in North Carolina, and our best wishes follow him to his new field.

The German Imperial Ministry of the Interior has made a grant of eighty thousand marks toward the expenses of the International Medical Congress, to be held at Berlin in 1890.

An epidemic of diphtheria is reported to have broken out at Lancaster, Ohio. More than a hundred cases are reported, and the public schools have been closed by order of the Board of Health.

Dr. Babbett, of North Adams, Mass., recently deceased, left instructions in his will that his library and surgical outfit should be given to "some worthy young student in the medical profession."

Sufficient Evidence.—*Esau Goup*—"I say Elisha, did you ever have any faith in hair restorers?"

Elisha Baldwin—"Why? Don't I look like a victim of them?"

Dr. Carl H. von Klein, of Dayton, Ohio, who has been especially active in ancient literature, has recently published a very interesting letter in the Daily Journal of his home on the "Language Christ Spoke."

THE new edition of Professor Virchow's *Cellular Pathologie*, on which its distinguished author has been engaged for some time, will, it is announced, appear at the time of the International Medical Congress at Berlin.

THE Medical Jurisprudence Society held its forty-fourth stated meeting in the hall of the College of Physicians, Thirteenth and Locust Streets, last month. Dr. John J. Reese and John A. Clark, Esq., read papers.

GERMANTOWN HOSPITAL CHANGES.—Resident Physician M. W. Zimmerman, of the Germantown Hospital, resigned December 11th to accept a similar position in the Orthopædic Hospital. Dr. Faultz will succeed him.

A SERIOUS AFFLICTION.—"Well, I see old Mithomer has died at last."

"Yes; it was a sad loss to me."

"I didn't know you were a friend of his."

"No; I was his physician."—*Life.*

TAKE ten writers of novels whose books have a fine sale, and ten mechanics who have steady work at two dollars and fifty cents per day, and at the end of two years the mechanics will have earned the most money.—*Detroit Free Press.*

THE PHILADELPHIA HOME FOR INFANTS had, last month, a successful Donation Day. The home is located at 4618 Westminster Avenue, has been in operation for nearly twenty years, and is one of the many beneficial institutions of the city.

THE two sides of the face are by no means alike. As a rule, says a German professor, the want of symmetry is confined to the upper part of the face. Among other singular eccentricities is the fact that the right ear is almost invariably higher than the left.

FIRE IN A FEVER HOSPITAL.—A London dispatch reports that the fever hospital at Rochester has been destroyed by fire. All the inmates were rescued, but fifteen of them were taken from places where they were in great danger with difficulty by the nurses.

THE Seventh International Pharmaceutical Congress will be held at Milan in the early part of September, 1890. Notice of the intention to take part in the proceedings must be sent to the committee not later than November 30, 1889. The fee is ten lire.

THE FAITH CURE NOWHERE.—A Chicago girl was cured of rheumatism the other day in a miraculous manner. When discovered she was standing on the parlor-table. A mouse can sometimes do more than Christian science.—*Leslie's Illustrated Weekly.*

THE POWERS COLLEGE OF PHARMACY, named in honor of the late Thomas H. Powers, and whose incorporators are Dr. Lemuel J. Deal, John E. Cook, Dr. William H. Pancoast, Dr. James Van Buskirk, and Dr. Ernest F. Apeldow, has applied for a charter.

WHEN SMOKING IS NOT INJURIOUS.—Dr. Alfred L. Loomis, the eminent authority on the lungs, says he is strongly opposed to smoking in the morning. Smoking moderately at any time after luncheon, even just before retiring, he does not consider injurious.—*Epoch.*

CREMATION is coming more and more into vogue in Germany, in spite of the expense and certain legal difficulties which render its performance in some parts almost an impossibility. At Gotha no less than one hundred bodies have been cremated during the present year.

A GERMAN doctor has made an alarming discovery about cancer. The disease attacked a tame rat in his possession, and, having no qualms of conscience about vivisection, he tried, successfully, to inoculate two others with it, they taking the disease in its malignant form.

"FORCE, gentlemen," said the Professor, "and power are not always found in large bodies. Sometimes the smallest things will be more powerful than the great ones. Can you give me an illustration, Mr. Blowtin?"

"The ace of trumps, sir," replied the student.

Visitor (to New York hospital nurse)—"Any new patients brought in to-day?"

Nurse—"Only a few thumb cases."

Visitor—"What are thumb cases?"

Nurse—"People who get their thumbs mashed by the slamming of the elevated railroad gates."

ENDOWING A FREE BED.—Mrs. Catharine A. Wentz, of this city, has, through her friend, Mrs. George P. Stubbs, given five thousand dollars to endow a perpetual free bed in the Medico-Chirurgical Hospital, to be known as the Ann Emerick bed, in memory of her deceased mother.

PROFESSOR NEUMANN, who was called in to the late King of Portugal, has had the cross of a Commander of the Order of Santiago de la Espada conferred on him. According to a Portuguese newspaper (Jornal do Comercio) he received a fee of four thousand and thirty-two pounds for his visit to Lisbon.

A GENTLEMAN who reads manuscripts received by a principal publishing house says that quite 90 per cent. of them are rejected because of their illiteracy. Yet an author complained the other day that nearly all his fellow-boarders at a summering place had shown him original stories which were not only interesting but well written.

LIKE MANY LAWYERS.—*Smith* (a physician)—"I tell you, doctors are a necessity, but lawyers are not."

Briefs—"They are not? How do you make that out?"

"Because necessity knows no law."—*N. Y. Sun.*

THEY have taught deaf mutes to talk in Paris! This result has been accomplished after years of labor, and M. Javal, "director" of the National Deaf and Dumb Institution, has given the public an example of the ability of some of his pupils to speak.—*New York Commercial Advertiser.*

A SCHOOL for the thorough instruction of nurses in the care of babies is to be established in New York, in connection with the Babies' Hospital there. The Herald states that there is no school of the kind either in this country or in England, the only one in existence being in Germany.

TO ORDER.—*Mrs. Rittenhouse*—"Doctor, I must go to Florida at once, and I have come to consult you."

Dr. Girardin—"Why, my dear madam, what's the matter?"

Mrs. Rittenhouse—"That's what I want you to tell me."

IN THE AUTUMN.—*Doctor*—"Even if your wife, my dear sir, does not seem quite cured of the malady for which I recommended the baths, you must remember that she has gained ten pounds. You will know how to value that."

"Exactly; precisely; every pound cost me $100."—*Fliegende Blätter.*

INDIGNANT PHYSICIAN—"Man, what have you done? You sent my patient the wrong prescription and it killed him."

Druggist—"Vell, vhat vas der matter mit you? Last veek I sent your odder patient der right prescription and dot killed him. How can somebody please sooch a man!"—*Springfield Republican.*

"PUBLIC SCHOOLS AS AFFECTING CRIME AND VICE" is the title of an article by Benjamin Reece, to appear in The Popular Science Monthly for January. Mr. Reece cites figures which show that crime does not decrease as illiteracy is diminished, and says that our school system should be made more effective by the addition of moral teaching.

A GENTLEMAN in Brooklyn found himself too stout, and determined to live on clam-broth, and nothing else, for forty days. The result was that his weight fell from two hundred and ten pounds to one hundred and eighty pounds, and he now folds his last year's clothes around him like an Indian in a blanket. He says the process did not hurt him at all.

THE old doctor was in rather a sentimental mood. He had been talking very sentimentally about sick people and death, and other cheerful themes. "Ah! well," he said, "I've been a doctor for forty years, I have seen many sad scenes, but I never stood at a deathbed without mourning for the living."

NEW JERSEY SANITARY ASSOCIATION.—At the fifteenth annual meeting held in Trenton, N. J., in November, 1889, Dr. Dowling Benjamin, the president, gave a most interesting address on the Thermometry of Hygiene. The Association recognized the work of the members of the profession present by electing Dr. E. L. B. Godfrey, of Camden, N. J., vice-president for 1890.

PHOTOGRAPHY has attained a recognized position in medicine. There are amateur photographers on the staff of nearly every hospital, and the extensions now being carried on at the English Royal College of Surgeons comprehend a "photograph room." Before long the surgeon will think no more about carrying his camera than he does now of carrying his stethoscope.

A FLAGRANT CASE.—"Going to the apothecary's? Well, I wouldn't go to Pestle's."

"Why not."

"He's so disobliging. I went there the other evening to get a postage stamp, and he actually refused to change a five-dollar bill for it. I made up my mind then that I should transfer my custom to some other druggist."—*Boston Transcript.*

MEDICO-LEGAL SOCIETY.—The following officers were elected at its last quarterly meeting: President, Dr. W. F. Waugh; First Vice-President, Dr. Martin; Second Vice-President, Dr. W. Buckby; Recording Secretary, Dr. Horace K. Reeger; Corresponding Secretary, Dr. T. H. McBride; Treasurer, Dr. G. M. D. Peltz; Board of Censors, Drs. Connor, Hazel, and Stewart; Librarian, Dr. Nash.

DR. EPHRAIM CUTTER, of New York, who has spent several months abroad, and was entertained very largely by many members of the profession generally in England, has returned home, looking in the best of health. Some weeks ago Dr. Cutter called on the Editor during a lively visit to Philadelphia, and, as usual, the doctor was brighter and more enthusiastic than ever upon his profession.

TWO CONSULTATIONS.—*Customer*—"Is Rubnose's Rheumatic Remedy good for acute rheumatism, the result of a cold?"

Drug Clerk—"I—I don't know. I'll see." (Whispers to proprietor.) "Have we Rubnose's Rheumatic Remedy?"

Proprietor—"No; only Bullfinche's."

Clerk (to customer)—"No; not half so good as Bullfinche's."—*Harper's Bazaar.*

A WELL-KNOWN European physician professes to have discovered the bacillus which causes baldness. These bacilli, according to Dr. Gaymonne, invade the hair-follicles, and make them so brittle that they break off. If the mischief has not gone too far the bacilli may be exterminated by smearing the hair—or the spot where the hair had been in happier days—with a mixture consisting of cod-liver oil and the juice of onions.

DOCTOR VS. LAWYER.—A physician of an acrimonious disposition, and having a thorough hatred of lawyers, reproached a barrister with the use of phrases utterly unintelligible. "For example," said he, "I never could understand what you lawyers mean by docking an entail."

"That is very likely," said the lawyer, "but I will explain it to you. It is doing what you doctors never consent to—suffering a recovery."—*Texas Siftings.*

CUSTOMER (in drug store)—"Give me about ten grains of quinine in four ounces of whisky. My physician says If I don't take plenty of quinine I'm a dead man."

Clerk—"Sorry, sir, but we're all out of quinine; there is a carload on the way."

Customer—"I s'pose there is, but it doesn't do me any good. Well, give me eight ounces of whisky then; I've got to do something for this terrible malaria.—*The Epoch.*

A NEW CHARITY.—The Medical Aid Association for Self-supporting Women is the latest addition to the charitable institutions of Philadelphia. Ex-Judge Thomas R. Elcock, as solicitor of the new charity, has applied for a charter, under which it will be permanently organized. The incorporators are Prof. James Tyson, Dr. Joseph Price, Dr. John B. Deaver, Bishop R. L. Nicholson, of the Reformed Episcopal Church, and Rev. George Dana Boardman.

Assistant Editor—Here is an inquiry from a fellow who wants us to tell him in our "Answers to Correspondents" whether it is proper to use the word "without" in the sense of "unless."

Editor Daily Tomahawk (reflecting a moment)—Haven't I used it in that sense in one or two editorials lately?

Assistant—I think you have.

Editor—Tell him such use of the word is sanctioned by many of the best living writers of English.

NOT FOR CASH.—"Doctor," he said, as they met on the platform of the street-car, "can I get a little advice of you?"

"For cash?"

"Well, no. I simply want to ask a question or two, and being an old patient of yours, you won't think of charging me."

"Go ahead."

"Well, my feet are troubling me and I thought——"

"Cut 'em right off!" interrupted the doctor. "I've often wondered why you didn't do it. I've got to get off here—good night!"

NOW that leprosy is being so much discussed in various parts of the world, it may not be uninteresting to cite a few of the chief causes of the disease as set down in the old Hindoo medical works: (1) Sleeping in the daytime; (2) eating when the appetite is not keen; (3) gluttony; (4) eating too much of new rice, curd, fish, salt, acids, treacle, and cakes; (5) drinking cold water when fatigued, or suffering from fear; (6) excessive physical exertion after meals; (7) exposing one's self for any long time to the sun after breakfast or noon meal; (8) drinking liquors; (9) insulting a Brahmin.—*Colonies and India.*

A NOVEL cure was effected by the use of the dynamo recently at Westgate-on-Sea, England. A Mr. Brown was fitting a false bottom to a grate, and while chipping it to make it fit, a very small splinter of iron flew off and struck him in the eye. An electrical engineer who met him shortly after, seeing his plight, took him to a dynamo that was working near by. Brown placed his eye as close as possible to the machine, and the magnetic attraction was sufficiently intense to withdraw the splinter of iron from the eye, which was instantly relieved and which gave no further trouble.

THE native Egyptian is an extremely good subject for surgical operation. Clot Bey, the founder of modern medicine in Egypt, has it that it requires as much surgery to kill one Egyptian as seven Europeans. In the native hospitals the man whose thigh is amputated at two o'clock is sitting up and lively at six. Shock is almost entirely unknown, and dread of an impending operation quite an exception. In explanation may be noted the resignation inculcated by their religion, the very small proportion of meat they eat, the total absence of alcohol from their diet, and, in general, their regular, abstemious out-of-door life.—*Science.*

DR. WHITTAKER, of Cincinnati, in an article in the Nashville Journal of Medicine and Surgery, draws attention to the palace car as a medium for the dissemination of tuberculous disease. He says that the cars, owing to the caprice of individual travelers, are generally ill-ventilated, and there is no regard paid to the liability of infection. In some of the express trains a passenger may be literally confined to an atmosphere containing tuberculous dust for days together. He urges the replacement of plush by leather, of carpets by rugs, of curtains by wooden

or leather screens, and the provision of separate compartments for invalids or consumptives traveling in search of health.

THE use of electricity in surgery is extending daily. It is now largely employed in England in gynæcological cases. It has long been known to be capable of relieving neuralgic pain, and has now been applied to cases of ovarian neuralgia, the treatment of which presents peculiar difficulties. Dr. Apostoli, in giving the results of his practice, states that he has often had patients whose ovarian region was so painful and tender that they could not bear the slightest pressure, but who, after a few minutes' application of the inducted current, could submit to firm pressure without any indication of pain, declaring that both pain and tenderness had entirely disappeared.—*Ex.*

FROM December 10th to 16th witnessed the great festival held in behalf of the Medico-Chirurgical Hospital. The Academy of Music has been nightly crowded to the doors, and thousands of persons have been delighted by the novel and beautiful spectacles provided by the Managers. The Medico-Chirurgical entertainments have become recognized as a feature of the winter, having now been held for five successive seasons, with constantly increasing magnitude, until they have the credit of holding the greatest fair which has been seen in Philadelphia since the Sanitary Fairs during the war. Whether they can outdo their present exploit seems doubtful. We understand that the hospital has cleared a very large sum.—*Times and Register.*

AN APPEAL FOR AID.—The second annual report of the Board of Governors of the Gynecean Hospital, Eighteenth and Hamilton Streets, a free institution for the benefit of suffering poor women, just issued, shows that during the past year one hundred and forty-one patients were treated. Finding that a larger building is absolutely essential for the purpose of continuing the good work, the board made an appeal to the charitable for contributions to enable them to secure better quarters. A small appropriation was made by the State for equipping and furnishing a new building, but there are no funds on hand for purchasing a property. All contributions in aid of this worthy object will be thankfully received by President Alexander Biddle, or any of the officers connected with the hospital.

THE NORWAY LEPERS.—Dr. Robson Roose has published, in the Fortnightly, an interesting account of the system adopted by the Norwegian government toward lepers. Unless we are to take leave of our senses it must be admitted that this horrible disease is contagious, and can only be stamped out by the enforced isolation of those affected. In Hindoostan alone, as Dr. Roose points out, there are above a quarter of a million of lepers who are free to go where they please. Admitting contagion, it is pretty clear that we, whose only plea for retaining India is that our rule benefits its population, are most outrageously shirking our duty. Empire, like property, has its duties as well as its pleasures.—*Truth.*

THE HOWARD HOSPITAL.—The Managers and Committee of Lady Visitors of the Howard Hospital have selected January 24th to throw open their new building, at Broad and Catharine streets to the inspection of the public. The hours will be from three to five o'clock. It is desired to afford the public the opportunity to see the good work that is being done there. A training school for nurses has been established in connection with the hospital. In the five months, up to November 1st, the hospital has done a vast amount of good in healing the sick and promoting medical attendance to the poor. Donations are solicited for the Diet Kitchen, and this worthy institution will also gratefully receive assistance in any other form in which its usefulness and prosperity may be aided and increased.

CONTRARY to popular notions, Sir Morell Mackenzie will, it is stated by the London correspondent of the Birmingham Post, have no interest whatever in the result of the forthcoming action between Messrs. Sampson Low and the London Standard. The author of "Frederick the Noble" was not affected, pecuniarily or otherwise, by the sale of his work, which was purchased outright and paid for by his publishers before they had seen a line of the manuscript. This fact also disposes of the suggestion that the book was, as some critics asserted, intentionally written in "catch-penny" style. Sir Morell will take no part in the trial, unless he should be subpœnaed to prove that he in no way authorized the premature publication of the gist of his work.

STATISTICS OF LEPROSY IN THE UNITED STATES.—In view of the general impression that leprosy is spreading in this country, it is desirable, in the interest of the public health, to obtain accurate information upon this point. The undersigned is engaged in collecting statistics of all cases of leprosy in the United States, and he would ask members of the profession to aid in this work by sending a report of any case or cases under their observation, or coming within their knowledge.

Please give location, age, sex, and nationality of the patient, and the form of the disease—Tubercular or Anæsthetic; also any facts bearing upon the question of contagion and heredity.

Address DR. PRINCE A. MORROW,
Jour. of Cutaneous and Genito-Urinary Diseases,
66 West 40th Street, New York.

STATISTICS ON LEPROSY.—Dr. H. S. Orme, of Los Angeles, California, has sent out the following letter, and will be pleased to receive replies from those having cases of leprosy under their care:—

"As I am collecting statistics on leprosy, and am desirous of ascertaining the number of well-authenticated cases in the United States, you will favor me greatly if you will answer appended questions:—

"Do you know of any cases of leprosy in your State?

"If so, where?

"How many and of what form?

"Are they kept segregated?

"What is their nativity?

"What is their sex?

"What is their age?

"Where was the disease contracted?

"Have you known of any deaths?"

HYPNOTISM.—At a meeting of the Contemporary Club in the Hazeltine Galleries recently, Professor George S. Fullerton, of the University of Pennsylvania, delivered an address on "Hypnotism," illustrating it by experiments on Rev. Dr. D. W. Hummell and Messrs. James Perry and John Ashhurst. Dr. Cattell, of the University, afterward announced that the institute contained the most complete facilities for experimenting in this science. Dr. George M. Gould followed. He took strong ground against hypnotism and said:—

"A mesmerist is not always a moral man, and on account of the evil that is possible from the actions of those who may have others under the control of their more powerful will to such an extent as is possible in hypnotism, I think the study of it should be suppressed by law. We are positively certain that it will never be of any use excepting as being exemplary of a peculiar phenomena. I do not see the advisability of wasting time in its pursuit."

DIRECTORY OF NURSES.—At a meeting of the Directory of Nurses, held yesterday afternoon at the northeast corner Thirteenth and Locust Streets, the following officers were elected: President, Dr. Wharton Sinkler; Vice-Presidents, Sarah G. Haydock, Ivy Schaffer; Secretary and Treaurer, Mrs. Lake; Physician, Dr. J. Madison Taylor. A Board of Managers, consisting of fourteen members, were also elected.

The object of the society is to afford protection and give sick benefits to all trained and registered nurses who are members of the organization. At the meeting held last week there were one hundred and twenty names enrolled, and since that time twenty-five new names have been added to the list. There are between six and seven hundred trained nurses now registered at the College of Physicians, and it is hoped soon to have the greater number of these as active members of this new organization, so that the sick benefits may be increased accordingly.

HOW TO KEEP WARM.—It may be generally known that, when exposed to severe cold, a feeling of warmth is readily created by repeatedly filling the lungs to their utmost extent in the following manner: Throw the shoulders well back and hold the head well up. Inflate the lungs slowly, the air entering entirely through the nose. When the lungs are completely filled hold the breath for ten seconds or longer, and then expire it quickly through the mouth. After repeating the exercise while one is chilly, a feeling of warmth will be felt over the entire body, and even in the feet and hands. It is important to practice this exercise many times each day, and especially when in the open air. If the habit ever becomes universal, then consumption and many other diseases will rarely, if ever, be heard of. Not only while practicing the breathing exercise must the clothing be loose over the chest, but beginners will do well to remember, in having their clothing fitted, to allow for the permanent expansion of one, two, and even three inches which will follow.—*The Northwestern Magazine.*

THE GYNECIAN HOSPITAL.—The second annual meeting of the Gynecian Hospital was held, near the close of 1889, at the institution, Eighteenth and Hamilton Streets. The Board of Governors in their report express gratification at the continued success which has attended their efforts, and tender their sincere thanks to the contributors and "request a continuance of the same charitable aid and interest in this humane work which has encouraged them heretofore."

The number of patients receiving treatment at the hospital since the previous report was 141, with a mortality of only 3 per cent. of the worst class of cases. The treasurer's report shows a total receipt of $5811.91 and an expenditure of $6061.69, leaving a deficit of $249.78.

The following compose the Board of Governors of the institution; Alexander Biddle, Esq.; J. Sergeant Price, Esq.; R. A. F. Penrose, M.D.; Mr. H. Blake Tyler, Thomas Wister, M.D.

The following are the officers: President, Alexander Biddle; Secretary, Dr. Thomas Wister; Treasurer, H. Blake Tyler; Attending Surgeons, Joseph Price, M.D.; Charles Bingham Penrose, M.D.; Pathologist, Morris Longstreth, M.D.; Consulting Surgeon, D. Hayes Agnew, M.D.; Consulting Physician, J. M. Da Costa, M.D.; Matron, Miss Rachel Pletcher.

HEARING AT A DISTANCE.—The distance at which the ear can distinguish sound depends

upon the intensity of the sound, the medium through which it is transmitted, and other causes including the state of the atmosphere. In the Polar regions Sir John Franklin said he conversed with ease at a distance of more than a mile. Sound has greater force in water. Colladon, by experiments made in the lake of Geneva, estimated that a bell submerged in the sea might be heard at a distance of sixty miles. Franklin asserts that he heard the striking together of two stones in the water half a mile away.

The report of cannon travels very far because it communicates a vibration to the soil. The cannonade of Florence was heard beyond Leghorn, about fifty-six miles off, and that of Genoa 100 miles off. In 1762 the cannon of Mayence was heard at Tinbeck, a village 148 miles off. When the English landed in Egypt on one of their expeditions, the firing was distinctly heard 130 miles off. In 1809 the booming of the cannon in Heligoland reached Hanover, a distance of 157 miles. But the greatest distance at which artificially produced sounds are known to have been heard was on December 4, 1832, when the cannon at Antwerp were heard in the Erzgebirge mountains, 370 miles distant. The noise produced by an intense eruption of Mount Cotopaxi, in South America, in 1744, was heard at a distance of 600 miles.—*Evening Telegraph.*

TENTH INTERNATIONAL MEDICINISCHER CONGRESS ZU BERLIN, 1890 (ABTHEILUNG FUR GEBURTSCHULFE UND GYNÆKOLOGIE.) GESCHAFTSFUHRER: DR. A. MARTIN, BERLIN, N. W., MOLTKE STR., O., DEX. 2, 1889.—The following letter of interest to the profession we give to our readers:—

DR. E. CUTTER, New York. *Dear Sir:* The Committee of Organization of our Gynæcological Section proposes for discussion "The Electrolysis of Neoplasmata." We have invited Apostoli, and I have the honor to invite you to second him in the debate. At your side, Th. Keith, Edinburgh, and Zweifel, Leipzig, are invited to do so. We have learned with great pleasure by your favor of November 11th, to Lassar, that you will come to our meeting. It would be of high value that you represent your American brethren and their views in this most interestiag question of electro-therapeutics.

Of course this official address does not prevent you to read the papers. Out of the list, I think the first will be of peculiar value,—"Food as a Medicine in Uterine Fibroids" in connection with the capital question of "Electrolysis in the Treatment of Fibroids." The second one, "Stem Pessary," may be read among the other papers discussing the orthopædic treatment in gynæcology.

I hope to see you coming here with a large number of American brethren to meet the Congress. Our special programme is to be issued as soon as the gentlemen assigned introductory addresses have sent in their answers.

Believe me to be yours, truly,

A. MARTIN.

USES OF COFFEE—THE MANY BENEFITS PRODUCED BY THIS VALUABLE PLANT.—It is asserted by men of high professional ability that when the system needs a stimulant nothing equals a cup of fresh coffee. Those who desire to rescue the drunkard from his cups will find no better substitute for spirits than strong, new-made coffee without milk or sugar. Two ounces of coffee, or one-eighth of a pound to one pint of boiling water, makes a first-class beverage, but the water must be boiling, not merely hot. Bitterness comes from boiling it too long.

If the coffee required for breakfast be put in a granetized kettle over night and a pint of cold water poured over it, it can be heated to the boiling-point and then set back toprevent further ebullition, when it will be found that while its strength is extracted its delicate aroma is preserved. As our country consumes nearly ten pounds of coffee per capita it is a pity not to have it made in the best manner.

It is asserted by those who have tried it that malaria and epidemics are avoided by those who drink a cup of hot coffee before venturing into the morning air. Burned on hot coals it is a disinfectant for a sick room. By some of our best physicians it is considered a specific for typhoid fever.—*The Epicure.*

IT is claimed that a German chemist has discovered in the cocoanut a fatty substitute for butter, and the United States Consul at Mannheim, Germany, reports that the new product has begun to be manufactured on a large scale in that city. A single factory produces 6000 pounds of it per day, worth in the market fifteen cents a pound. The nuts used are obtained mostly from the South Sea and Coral Islands, Arabia, the coast countries of Africa and South America. Natives in countries where the nuts grow have for a long time used the milk of these nuts instead of food oils. The butter contains 60 to 70 per cent. of fat and 25 per cent. of organic substances, of which 10 per cent. is albumen. In a country where real butter runs all the way from twenty-five to thirty cents per pound, cocoanut butter at half that price is thought to have a great future before it. At present it is chiefly used in hospitals; but it is rapidly finding its way to the tables of the poor, particularly as a substitute for oleomargarine. It is free, also, from germs of tuberculosis, which is said to afflict fully 10 per cent. of the milk-giving cows in Germany. The Consul recommends the adop-

tion of this new butter as an article of manufacture in the United States.—*Exchange.*

THE CLOTHING OF BABIES.—Although I own that children are now more sensibly clothed than was the case thirty years ago, it is still common to see an infant, who can take no exercise to warm himself, wearing a low-necked, short-sleeved, short-coated dress in the coldest weather. The two parts of the body—viz., the upper portion of the chest and the lower portion of the abdomen—which it is most important to keep from variations of temperature, are exposed, and the child is rendered liable to colds, coughs, and lung diseases on the one hand, and bowel complaint on the other. What little there is of the dress is chiefly composed of open work and embroidery, so that there is about as much warmth in it as in a wire sieve, and the socks accompanying such a dress are of cold, white cotton, exposing a cruel length of blue and red leg. I cannot see the beauty of a pair of livid-blue legs, and would much rather behold them comfortably clad in a pair of stockings. If the beauty lie in the shape of the leg, that shape will be displayed to as much advantage in a pair of stockings; if it lie in the coloring of the flesh, beautiful coloring will not be obtained by leaving the leg bare; and, from the artistic point of view, a blue *or* red stocking is infinitely preferable to a blue *and* red leg.—From "Mental and Physical Training of Children," by JESSIE O. WALLER, in the *Popular Science Monthly* for December.

WHAT PRODUCES DEATH.—Some one says few men die of age. Almost all persons die of disappointment, personal, mental, or bodily toil, or accident. The passions kill men sometimes even suddenly. The common expression, "choked with passion," has little exaggeration in it, for even though not suddenly fatal, strong passions shorten life. Strong-bodied men often die young; weak men live longer than the strong, for the strong use their strength, and the weak have none to use. The latter take care of themselves, the former do not. As it is with the body, so it is with the mind and temper. The strong are apt to break, or, like the candle, run; the weak burn out. The inferior animals, which live temperate lives, have generally their prescribed term of years. The horse lives twenty-five years, the ox fifteen or twenty, the lion about twenty, the hog ten or twelve, the rabbit eight, the guinea-pig six or seven. The numbers of all bear proportion to the time the animal takes to grow its full size. But man, of all animals, is one that seldom comes up to the average. He ought to live a hundred years, according to the physiological law, for five times twenty are one hundred; but, instead of that, he scarcely reaches an average of four times the growing period. The reason is obvious: man is not only the most irregular and most intemperate, but the most laborious and hard-working of all animals. He is always the most irritable of all animals, and there is reason to believe, though we cannot tell what an animal secretly feels, that, more than any other animal, man cherishes wrath to keep it warm, and consumes himself with the fire of his own reflections.—*Scientific American*, November 9, 1889.

THE PHILADELPHIA POLYCLINIC AND COLLEGE FOR GRADUATES IN MEDICINE.—The Board of Trustees, in recognition of distinguished services rendered the institution, as former Professors, have elected Richard Levis, M.D., Emeritus Professor of Surgery; J. Solis-Cohen, M.D., Emeritus Professor of Diseases of the Throat; Charles H. Burnett, M.D., Emeritus Professor of Diseases of the Ear; and Charles B. Nancrede, M.D., who was recently called to the Chair of Surgery in the University of Michigan, Emeritus Professor of General Orthopædic Surgery.

An additional Chair of Orthopædic Surgery was created, and Thomas G. Morton was elected Professor. Professor Morton will utilize the vast clinics of the Orthopædic Hospital and Infirmary for Nervous Diseases, Professor S. Weir Mitchell having for some time past used the Nervous Department.

A new Department of Dentistry was created, and the Faculty was authorized to place a competent teacher in charge until the next meeting of the Trustees.

A new Department of Experimental Therapeutics and Physiology was created, and Thomas J. Mays, M.D., was elected Professor.

The Chair of Clinical Surgery was filled by the election of Thomas S. K. Morton, M.D., Professor.

C. L. Bower, M.D., was elected Adjunct Professor of Clinical and Operative Surgery, and J. Abbott Cantrell, M.D., Adjunct Professor of Diseases of the Skin.

The Chair of Pathology was left vacant until the next meeting.

The report of the Building Committee was read, in which it was stated that contracts had been signed for preliminary work to the amount of $23,150. About $30,000 will be required to finish the building, and it was decided to push the building to completion as fast as the donations for the purpose could be obtained. The overcrowded condition of the present building makes it necessary to use every exertion to move into the new building in the early spring, even though it be unfinished. The corner-stone was laid Monday, November 4, by the Grand Master and officers of the Grand Lodge of Free and Accepted Masons, of Pennsylvania. Addresses were made by Clifford P. McCalla, Esq., Grand Master of Masonry.

BOOK REVIEWS.

The Physician's Visiting List for 1890. Published by Lindsay & Blakiston, 1012 Walnut Street, Philadelphia.

It is both neat and compact in appearance. This annual book, which has improved with each year, contains much of practical interest to the physician.

The Cure of Crooked and Otherwise Deformed Noses. By JOHN B. ROBERTS, A.M., M.D., Professor of Anatomy and Surgery in the Philadelphia Polyclinic; Lecturer on Anatomy in the University of Pennsylvania; Surgeon to St. Agnes' Hospital. Philadelphia: P. Blakiston, Son & Co., 1012 Walnut Street. 1889.

This small volume is upon a subject of interest, especially to the surgeon. Dr. Roberts has made many observations upon crooked and deformed noses, and his research has been well received. The text is good, and the illustrations demonstrate what can be accomplished by surgical skill in removing or setting deformities of the nose.

A Hand-Book of Dermatology, for the Use of Students. By A. H. OHMANN-DUMERUIL, A.M., M.D, Professor of Dermatology, St. Louis College of Physicians and Surgeons; Consulting Dermatologist to the St. Louis City Hospital; Physician for Cutaneous Diseases, Alexian Brothers' Hospital, etc.; Editor St. Louis Medical and Surgical Journal. Illustrated. St. Louis: St. Louis Medical and Surgical Journal Publishing Co.

This small primer contains a short review, taken from the text-books of the various affections of the skin. The definitions are too brief to be of much service to the reader, and the treatment in the majority of instances is borrowed from other authors. It lacks originality, and it is a very poor abstract of the work upon dermatology of the present day.

Eating for Strength; or, Food and Diet in their Relation to Health and Work. Together with several hundred recipes for wholesome foods and drinks. By M. L. HOLBROOK, M.D., Professor of Hygiene in the New York Medical College and Hospital for Women, etc. New York: M. L. Holbrook & Co.

Food and diet is at the present time attracting much attention by the scientific study devoted to this subject. Disease is more frequently treated by proper hygiene and suitable food than by the use of the many drugs formerly recommended. The author of this book has collected and placed in form many tables and recipes for food and drink. The volume is written more for the popular consideration of food and diet than for a scientific discussion upon this important topic. Many valuable recipes are, however, collected together, and for the household it will be found a useful reference.

Practical Lessons on Nursing. Diseases and Injuries of the Ear: Their Prevention and Cure. By CHARLES HENRY BURNETT, A.M., M.D. J. B. Lippincott Company, Philadelphia, 1889. Price, $1.

This is an excellent little work, intended for popular instruction. The anatomy and physiology of the ear are clearly described with sufficient detail. The dangerous effects which may follow injudicious and unskilled attempts to extract foreign bodies or insects from the external auditory canal are indicated. The readers are cautioned against the dangers which attend bathing, diving, and swimming in cold water. The evil consequences which may ensue from the bad popular habits of boxing the ear or shouting into the ear are explained. Inflammation of the middle ear is succinctly portrayed. The development of disease of the drum-cavity due to affections of the throat, nose, or Eustachian tube is dwelt upon, as well as hygienic care in chronic catarrh of the middle ear. The causes and symptoms of maladies of the internal ear are discussed, and the work concludes with some brief hints on aural hygiene and the education of deaf-mutes.

The book is written in a concise and lucid style, and is well adapted to fulfill the purpose for which it is designed.

The Popular Science Monthly for December. D. Appleton & Co., New York.

The present issue of the Monthly contains the concluding portion of Dr. Morell Mackenzie's article upon "Speech and Song," and is a most interesting and practical discussion of the subject of song, its method of production and development, together with the precautions needed to maintain the healthy condition of the human voice. Professor Henderson, whose articles are always interesting, contributes a paper upon "Glass-making," with illustrations, and Jesse O. Waller writes some sensible suggestions upon the topic, "Mental and Physical Training of Children." An article attractive to anti-vivisectionists is that of M. Victor Laporte upon the subject, "Suspension of Vitality in Animals."

To many physicians, however, no part of this number will prove more suggestive than the sketch of the life of Dr. Robert Koch, who has already done so much toward advancing our knowledge of bacteriology, and this is accompanied by a well-executed wood-cut of the celebrated physician and scientist. The literary notices and popular miscellany occupy a considerable portion of the number, but none too much for the general reader who wishes to keep posted regarding current events, and who prefers to have his information from a reliable source.

Wood's Medical and Surgical Monographs. Volume IV, No. 3, December, 1889. William Wood & Co., Publishers, 56 and 58 Lafayette Place, New York.

The December number of this series includes some very instructive contributions. "A Practical Treatise on Baldness" abounds with much valuable material upon this much-neglected disease. Dr. Jackson, of New York, the author, has collected together in his article many facts of very great importance, and the paper is made of practical value by the large amount of space devoted to the treatment of baldness. Dr. O'Dea contributes to this volume a paper on "The Sphere, Rights, and Obligations of Medical Experts." A paper on "Notes on Dental Surgery" is to be found in the volume from G. Smith, M.D., LL.D. "Pathology and Treatment of Ringworms" forms a most interesting article, from the pen of Dr. George Theis, of London. This well-known author, who has made many original observations in pathology, treats of ringworm in an admirable manner. The text is well illustrated, and physicians can see from Dr. Theis' plates and description how hard it is often to cure this obstinate affection. The great English authority on diseases of the liver, Dr. George Harley, follows with a most practical contribution on "Sounding for Gall-stones and the Extrusion of Gall-stones by Digital Manipulation." This eminent physician, in speaking of this latter subject, adds: "So successful in my hands has proved this artificial mode of extruding biliary sand, gravel, and small calculi from both the gall-bladder and the bile-ducts, and getting them voided by stools, that it has become with me a routine form of practice."

Essay on Medical Pneumatology: A Physiological, Clinical, and Therapeutic Investigation of the Gases. By J. N. DEMARQUAY, M.D., Surgeon to the Municipal Hospital, Paris, and of the Academies of Belgium, Turin, Munich, etc.; Officer of the Legion of Honor; Chevalier of the Orders of Isabella-the-Catholic, and of the Conception, of Portugal, etc. Translated with notes, additions, and omissions. By SAMUEL S. WALLIAN, A.M., M.D., Member of the American Medical Association; Ex-President of the Medical Association of Northern New York; Member of the New York Medical Society, etc. Illustrated with five wood-engravings. Philadelphia and London: F. A. Davis, Publisher, 1889.

The therapeutic application of gases for the treatment of disease has attracted much attention of the profession of recent years. Demarquay, by his clinical and physiological observations, has brought the question before the scientific world, and given much valuable material upon gases. The essay, which is most practical, is divided into five chapters. The first concerns the study of the gases of the blood in their physiological condition; the second treats of oxygen,—the history and physiological action; the third refers to the preparation and administration of oxygen; the fourth the therapeutics, and the fifth being devoted to nitrogen, monoxide of nitrogen, and hydrogen. Chapter IV will be found of great service to every practitioner, for it states in such simple language the various diseases in which oxygen is employed. Cases are here cited, and the course and result shown of this excellent therapeutic agent, which can often be productive of curing so many diseases. Dr. Samuel S. Wallian, the author of the American edition of this useful work, has made many additions in Chapter VI, which place at the disposal of the physician all knowledge of the use and application of the apparatus for administering gases. The American author also gives some general suggestions which will be of much value to all practitioners who wish to employ this method of treatment.

A Compend of Human Physiology. Especially adapted for the use of medical students. By ALBERT P. BRUBAKER, A.M., M.D., Demonstrator of Physiology in the Jefferson Medical College; Professor of Physiology, Pennsylvania College of Dental Surgery; Fellow of the College of Physicians of Philadelphia. Fifth edition, revised and enlarged. Philadelphia: P. Blakiston, Son & Co., 1012 Walnut Street.

Nothing succeeds like success. This truism is again brought to our notice by the fifth edition of this excellent compend of physiology, embracing all that is essential to a fundamental understanding of its contents. Compends, by their very nature, have in these days become the student's steadfast friend, first making their acquaintance as a necessity. The author states in his preface that he has made many additions in the body of the work, especially new illustrations, and a table of physiological constants, the latter of which gives in short sentences the chief facts relating to the height, weight, number of chemical elements of proximate principles etc. This method brings many facts of importance in as condensed a manner as possible directly before the student. This work, covering nearly two hundred pages, is divided in the usual manner as to food, digestion, absorption, blood, respiration, etc., especial attention being paid to the nervous system and its adjuncts. This department of physiology is one of growing importance, as the latest investigations assign many diseases to nervous origin which were formerly supposed to arise in the blood. Under the properties and function of nerves this sentence is pregnant with suggestions relating to the above remarks: "The irritability of a sensory nerve may be increased

by congestion or inflammation, and decreased by cold, compression, and injuries." Many other striking, if not original, remarks are made, and the brief, concise, and scientific manner in which they are put contributes materially to the value of the work.

Man and his World; or, the Oneness of Now and Eternity. A Series of Imaginary Discourses between Socrates and Protagoras. By JOHN DARBY, Author of "Odd Hours of a Physician," "Nineteenth Century Sense," etc. Philadelphia: J. B. Lippincott & Co. 1889.

Prof. James Garretson, the well-known author of this most excellent volume, has been prominent in the literary and scientific world for many years. His writings have always been so interesting and scholarly as to attract the attention of men of letters in all walks of life. Probably the most interesting of all the works that have emanated from this great scholar's pen is before us. The reasoning set forth is most attractive to one who will but turn over the pages of this volume. After the introduction of the general argument the author speaks of the soul, and states in this connection admirably the following seven senses, as man knows himself: sight, taste, smell, hearing, touch, general sensation, and apprehension. The first six of these, he concludes, as we have felt ourselves compelled to acknowledge, are common to man and animals at large. The seventh is not necessarily a possession of man, yet, when met with, is found in the human alone. Reasoning upon the offices of the senses, the author points out most beautifully that God and soul are one.

Following this interesting matter, Dr. Garretson next speaks upon "who and what is man," in which he introduces most vivid reasoning, and among other good expressions thus defined mind: "Mind is an automatic or reflective ability residing, in varying degrees, in all organized bodies, and what is termed reason is this same ability in working action." After discussing the philosophy of the eternal knowledge of self, from complexity to simplicity, the philosophies from circumference to centre, from centre to small circumference, he concludes this scholarly work with description of "toward the subjective." Our author, writing of this latter word, says subjective is one with association of Ego and imagination. In other words, it is one with state of mind as painter of the pictures of a man's circumstances. Subjective, he concludes, is most inaptly to be defined as unseeable mind that dashes and scatters seeable spider-webs and houses—curiously enough the latter more easy of demolition by it than the former. The author of "Man and his World" has thus given both choice and interesting thoughts throughout this valuable book. Like all other works that have emanated from this great writer, who has shown in the pages of "Odd Hours of a Physician," "Hours with John Darby," "Brushland," "Thinkers and Thinking," "Man and his World," and "Nineteenth Century Sense," much knowledge of human nature and a perfect storehouse of invaluable matter for the student and the philosopher. The writings of Professor Garretson just referred to, and especially "Man and his World," fully demonstrate to the reader the work of a great thinker, a careful teacher, a philosopher, and the wise surgeon and acute physician. Some portions of this book are stated in the clear and forcible manner which marks the great work on "Oral Surgery," by the same author, which has given him an international reputation as the best-known authority upon this department of surgery.

A Hand-Book of Pathological Anatomy and Histology, with an Introductory Section on Post-mortem Examinations and the Methods of Preserving and Examining Diseased Tissue. By FRANCIS DELAFIELD, M.D., Professor of Pathology and Practical Medicine, College of Physicians and Surgeons, New York, and T. MITCHELL PRUDDEN, M.D., Director of the Laboratory of the Alumni Association of the College of Physicians and Surgeons, New York. Third edition. Illustrated by two hundred and twenty-four wood-engravings, printed in black and colors. New York: William Wood & Co., 1889.

The third edition of this work includes all the investigations made upon this important department. The introduction in Part I is post-mortem examinations, which is given in a terse and agreeable way, followed by the general methods of pressing pathological specimens. Part II is devoted to changes in the circulation and composition of the blood, degenerations, animal parasites and bacteria, inflammation, and tumors. While all the text is most interesting in this portion of the work, that which attracts more than a passing thought is devoted to bacteria. The artificial cultivation of bacteria as introduced by Dr. Robert Koch is here thoroughly treated, and is well illustrated by tubes containing a potato and other culture. In Part IV the authors make reference to the morbid anatomy of the organs, the lungs receiving especial attention. The pathological illustrations in connection with the respiratory system are particularly good. A very fine specimen of emphysema is given, showing holes in the walls of the air-vesicles from a case of chronic miliary tuberculosis. Pneumonia is also illustrated in a most striking and original way. On page two hundred and thirty-seven is a good specimen of acute lobar pneumonia,—red and gray hepatization,—showing the pneumonococci of Fränkel in the ex-

udation, which is stained red. A number of other very fine illustrations follow, and then we come to one unusually good, on page two hundred and forty-six, of lobular pneumonia in a child, complicating diphtheria. Air-vesicle, showing inflammatory products and large numbers of bacteria (streptococci), stained red with friction, is demonstrated. On the opposite page the authors give an admirable illustration of pneumonia of heart disease from a child's lung. The illustrations, which are to be found on a number of the preceding pages, are also good, showing interstitial pneumonia, miliary tubercle, and chronic phthisis. The text at this portion of the book is most attractive, especially upon phthisis, the disease so often met in practice, and the pathology of which every one should know well. The cavities of chronic phthisis, the authors write, are formed by the dilatation of inflamed bronchi, by the softening of areas of coagulation, necrosis, or by the combination of both of these processes. When cavities are once formed, the text continues, they are apt to continue (a point physicians should note) and to become larger as the disease goes on. Their walls may be converted into granulation tissue which ulcerates in some places and proliferates in others, or portions of the wall become necrotic, or all active processes cease and the wall of the cavity is formed of new connective tissue. The lung-tissue between the cavities becomes compressed and altered in various ways. As the cavities increase in size, they touch and open into each other. In this way, our authors conclude, a large portion of the lungs may be converted into a dense wall honey-combed with cavities. A most vivid picture is thus given of the changes of chronic phthisis. The work throughout abounds in text of this description, that keeps up the interest of the reader while glancing through the pages.

Among the other interesting diseases described by the authors may be named leprosy, and the bacilli of the affection is well demonstrated on page five hundred and fifty-seven. The third edition of Delafield and Prudden is the most thorough work upon this all-important department which has appeared in print.

A Text-Book of Practical Medicine, Designed for the Use of Students and Practitioners of Medicine. By ALFRED L. LOOMIS, M.D., LL.D., Professor of Pathology and Practical Medicine in the Medical Department of the University of the City of New York; Visiting Physician to Bellevue Hospital, etc. Eighth edition, revised and enlarged, with two hundred and fifteen illustrations. New York: William Wood & Co., 1889.

The eighth edition of this popular work, which is both useful to students and practitioners, shows that the text has been largely re-written. The author has made such additions and changes as to have the work conform to all the modern investigations in the practice of medicine. The additions upon etiology and pathology especially have been very extensive, owing to the recent research upon bacteriological study. The work upon the volume is enormous, giving the reader a book of eleven hundred and forty-seven pages of most interesting text. The author has carefully described all the diseases in the practice of medicine, and the number of them being so large we are only able in this review to *refer* to some of the most practical to the physician. If Dr. Loomis is known well in his profession it is for his writings and teachings upon phthisis, a disease to which he has given much thought and consideration. This *affection* is spoken about by the author as pulmonary tuberculosis on page 199. After referring in a general way to the two clinical varieties of this disease, he next dwells upon the morbid anatomy, etiology, symptoms, physical signs, differential diagnosis, prognosis, and treatment. In giving the prognosis Dr. Loomis makes some very strong and useful points which should be of great service to the reader. For instance, he says opinions in regard to hæmoptysis vary. Many think its occurrence renders the prognosis favorable, and that there is a large percentage of recoveries when frequent hæmoptysis occurs. My own experience leads me to the opinion that frequent hæmoptysis in an early stage of the disease is not unfavorable. When œdema, however, of the feet and lower extremities comes on in advanced phthisis the prognosis is very unfavorable, and a fatal issue is not far off. Under the treatment of this affection, while the prophylactic and medicinal are spoken of, at least that which has much practical bearing upon many cases, the hygienic, receives from the author marked attention. In this connection Dr. Loomis is positive in stating that atmospheric temperature is an important element in the climatic treatment of phthisis. Some patients he believes thrive best in a warm, sedative climate; others in a cool, stimulating climate. Extended clinical observation, however, has led the author to believe that it is neither the heat nor the cold of a certain locality, but the absence of sudden and frequent changes, which makes it so beneficial to phthisical invalids. Bright's disease is referred to as nephritis—a better term to apply to it. Much stress is laid by the author on this, and in truth in all the diseases in the work upon the morbid anatomy. The treatment of nephritis here referred to is of much value, inasmuch as it includes many of the progressive views of the author. In the application of remedies to this disease he adds: "While I do not accept the extreme views of those who believe uræmia to be an intestinal, absorptive disease, I

am convinced that cholagogue cathartics, used in moderation, are of decided value in renal disease; but such cathartics must be carefully distinguished, both as to the objects and results, from the use of hydragogue cathartics, which are intended simply to reduce dropsy and remove such poisonous elements as may be held in solution by the dropsical fluids."

Mercury is recommended for the cathartic as a direct stimulant to the parenchymatous action of the kidney. In connection with the increase of parenchymatous function an augmentation of the water elements in the renal secretion tends, Dr. Loomis writes, to accomplish the desired result. Digitalis is advised for the latter purpose. Its action, the author states, must be watched, however, and if the amount of urine is not increased its use is to be discontinued. Each disease receives from this author most thorough consideration, much valuable material being included from the researches made in the Loomis Pathological Laboratory. The accompanying illustrations of bacteriological work are unusually good, and are valuable as reference to practitioners.

A Treatise on Diseases of the Nose and Throat, in two volumes. By FRANCKE HUNTINGTON BOSWORTH, A.M., M.D., Professor of Diseases of the Throat in the Bellevue Hospital Medical College, New York; Consulting Physician to the O. D. P. Department of the Bellevue Hospital; Fellow of the American Laryngological Association; of the American Climatological Association, of the New York Academy of Medicine, of the Medical Society of the County of New York, etc. Volume I, Diseases of the Nose and Naso-Pharynx, with four colored plates and one hundred and eighty wood-cuts. New York: William Wood & Co., 56 and 58 Lafayette Place, 1889.

Volume one of this extensive work is divided nto forty-seven chapters and covers six hundred and forty-seven pages. Diseases of the nasal passages are referred to at length by the author in section one, and we may add here that the illustrations of the various instruments and their method of application are both original and of great utility to the physician.

The fundamental anatomy and physiology of the nose is in turn considered by the author in his clear style, which makes it of double interest to the reader. Two very valuable chapters follow on rhinitis, acute and chronic, or, as Dr. Bosworth defines the latter, a chronic inflammation of the mucous membrane lining the nasal cavities, characterized by a permanent dilatation of the blood-vessels, together with increased thickening of the intra-vascular tissue, as a result of which the normal tissue of the nasal passages is so far encroached upon as to interfere with free nasal respiration,—a very thorough definition of this disease, and one which physicians should know. In treating this affection we are pleased to see that Dr. Bosworth gives the reader many valuable prescriptions of combinations which have proved of service in his own experience. He recommended as an example the following for this disease:—

℞ Sodii bicarb., . . . gr. xij.
Sodii biborat., . . . gr. xxx.
Glycerini, ... ℥ss.
Aquæ, . . . ad ℥ij.
M. et ft. lotio.

Or,

℞ Sodii benzoat,
Sodii biborat., . . āā gr. xxx.
Thymol, ... gr. ij.
Aquæ, ... ℥iv.

Or,

℞ Acidi borici, . . . ℥ss.
Sodii chloridi, . . . gr. xl.
Sodii tartrat., . . . gr. xv.
Aquæ camphoræ, . . ℥ij.
Aquæ, . . . ad ℥vj.

To any of the above, he suggests, there may be added a vegetable or mineral astringent, such as

Acidi tannici, . . gr. x to the ounce.
Zinci sulphatis, . . gr. ij " "
Aluminis, . . . gr. v " "
Zinci sulpho-carbolat., gr. iij " "
Zinci chloridi, . . gr. j " "

These are best used, he recommends, by employing the little atomizer referred to in figure forty-seven of this work. In the absence of the atomizer, Dr. Bosworth advises the single device of insufflation of warm salt water from the hand. We are pleased to see that this practical volume contains very many valuable prescriptions under the various diseases referred to by the author. Hay fever is another affection upon which Dr. Bosworth shows, by his description and the method of treatment, a thorough knowledge of the subject. Here the author has also pointed out some most practical views which will be of much value to every practitioner. The external surgery of the nose, which concludes this excellent volume, contains many figures of operations upon this all-important member, and one very fine lithographic plate. Dr. Bosworth, who has by his former edition obtained most flattering notices, is again to be congratulated in producing one of the best works upon diseases of the nose and throat. We will anxiously look for the appearance of volume two, and predict a most hearty welcome from the medical press of the world.

COMMERCIAL NEWS.

A Valuable and Unique Business Calendar.

The most convenient, valuable, and unique business table or desk calendar, for 1890, is the Columbia Bicycle Calendar and Stand, issued by the Pope Manufacturing Company, of Boston, Mass. The calendar proper is in the form of a pad containing three hundred and sixty-six leaves, each five and one-eighth by two and three-quarter inches; one for each day of the year, to be torn off daily, and one for the entire year. A portion of each leaf is left blank for memoranda, and as the leaves are not pasted but sewed at the end, any entire leaf can be exposed whenever desired. By an ingenious device the leaves tear off independently, leaving no stub. The pad rests upon a portable stand, containing pen-rack and pencil-holder, and when placed upon a desk or writing-table the entire surface of the date-leaf is brought directly, and left constantly, before the eye, furnishing date and memoranda impossible to be overlooked. The stand is made of colored wood, mounted with raised letters in brass, and is practically indestructible. The days of the week, the number of the days of the year past and to come are specified, and upon each slip appear quotations pertaining to cycling from leading publications and prominent writers; and, although this is the fifth year of the calendar, they are fresh and new, mentioning the notable events in cycling, opinions of medical authorities, clergymen, and other professional gentlemen, the rights of cyclers upon the road, cycling statistics, records, advice about costumes, directions for road-making, and other interesting matter, the whole forming a virtual encyclopædia of cycling. Besides the cycling quotations there are many pertaining to typewriting, with occasional reference to the typewriters made by the Pope Manufacturing Company. The information contained on the calendar would, if placed in book-type, make a fair-sized volume.

For Index to Advertisements, see advertising page 39.

A Bargain for Medical Students.

One White's Physiological Manikin with key, one Yaggy's Anatomical Study with key, both as good as new, at 30-per-cent. discount.

Address, S. K. Heebner,
Hatfield, Montgomery Co., Pa.

Distinguished Testimony.

In Volume II of Grailly Hewitt, on "Diseases of Women," edited with notes and additions by H. Marion Sims, M.D., edition of 1888, is the following:—

"For severe dysmenorrhœa, I have frequently found Hayden's Viburnum Compound of great service, given in teaspoonful doses every hour for three or four hours."

Such is the testimony of the most eminent men in the profession. Men of real intellectual calibre and attainments are never afraid to commend that which they have proved to be beneficial and worthy of sanction.

Pedagogical.

Two eccentric-looking women, whose description seemed to identify them as Mrs. Malaprop and Mrs. Partington, were in a Fourth Avenue car yesterday, and entertained the passengers with their brilliant remarks. "I see from the papers," said one of them, "that they have fixed up a college of pedagogy and are going to give degrees. I think it is a horrid outrage. I won't say nothing about those Madison Square affairs, which certainly have a bad influence on the people. The idea! To watch a lot of crippled fools running around a ring for a whole week! I won't say nothing about that; but when they start a reg'lar college to train more such fools I think the law, or Mayor Grant, or Congress, or somebody ought to stop it." Why, Mrs. Partington," exclaimed her companion with a superior smile, "you've made a dreadful mistake. That college of pedagogy and the training school are not for walkers at all. It doesn't mean that." "Of course it does; if it doesn't what does it, then?" remarked the first, with charming consistency. "Corn doctors, of course," was the answer, and at the same moment the car ran off the track.—*New York Tribune.*

Physicians as Financiers.

Physicians are generally admitted to be exceedingly poor financiers. There is probably no class of men who realize so little financially from their labors.

For the last twenty-five or thirty years, efforts have been made to simplify the business books of physicians, so that as little time as possible would be required for a medical man to enter his charges, and keep something like a systematic account of his business. It has been found impossible for one engaged in the active practice of medicine to keep what is called a day-book, cash-book, and a ledger, for, with such a set of books, oftentimes not having time to enter any charges for two or three days, he will frequently forget many items.

Visiting Lists have been constructed to enable physicians more easily to keep account of their services, and they have certainly been of great use. We feel sure that through them we have saved many dollars, which without them we would have lost.

The very best book that we know of for a a physician, in which he can keep an account of his services to all his patrons, is Bernd's Physician's Register. For a physician to keep one of these requires no skill, no knowledge of book keeping. A ten-year-old child can master it, and yet a more methodical, a better adapted method of keeping a physician's accounts could not be devised. If a doctor cannot, with one of these, register all his business so that he can know at any time who owes him and who does not, there will be no hope of being able to devise anything for him so that he can keep an account of his business.

We consider the members of the medical profession are under great obligation to Messrs. Henry Bernd & Co. for their Register. We hope they will have a large sale, not for the sake of the Bernd's merely, but for the sake of the families of physicians.

The McArthur Hypophosphite Company have a unique advertisement in this issue. You will never regret reading it. See page 5.

Subscribers' Opinions.

I like your journal much. J. Weinhart, M.D., Toledo, O.

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I read the Bulletin with a great deal of pleasure and profit. The Bulletin is held in very high esteem all over New Mexico.
Amado Chaves, San Mateo, Mexico.

—

I am well pleased with the Bulletin, and expect to subscribe as long as I can raise a dollar. W. F. Roberts, Clinton, La.

—

It is much service to me, and I cannot affor to do without it. Dr. M. S. Keller,
Gober, Texas.

—

The journal is the best I get hold of, and decidedly the best for the money I have ever seen. A. G. Gunther, M.D., Beulah, S. C.

A Rothrock, M.D., McVeytown, Pa., says: I have prescribed Aletris Cordial in a case of threatened miscarriage, The woman had had three miscarriages in five years. Some six weeks ago, she being in her fifth month of pregnancy, was attacked with hæmorrhage, bearing-down pains, and all other symptoms of threatened miscarriage. I prescribed Aletris Cordial, which subdued the hæmorrhage, bearing-down pains, and all nervous symptoms that foreboded the old trouble, and at this time she promises fair to go to full term.

AMENORRHŒA.

℞ Ol. sabinæ, . . . 2 drachms.
Ol. rutæ, . . . 2 drachms.
Alcohol, . . . 1½ oz.
Dissolve and add:
Aletris cordial, . . 4 oz.
M. Sig.: Teaspoonful three times a day.

The Doctor's Wife.

Something of interest to her will be found on advertising page 20 of this number.